

Bluestone Camp & Retreat
36 Middle Camp Road
Hinton, WV 25951
Fax: (304) 466-5152

Molly Gant Scholarship Fund Application Form

(Revised 2014)

The purpose of the Molly Gant Scholarship Fund is to provide resources for campers to attend Bluestone's Summer Camping Program when they would otherwise not be able to afford the registration fee. **Applications must be postmarked or faxed by June 1 to be considered for an award.**

Scholarship awards will be no less than one half of the camp registration fee. Be advised that if your camper is awarded a scholarship, the registration deposit will be satisfied by the awarded amount. The Parent/Guardian will be billed for whatever balance remains.

The Parent/Guardian should fully complete Sections 1 – 4 of this form. Please have your camper complete Section 5.

SECTION 1: CAMP REGISTRATION FORM

This is the general information we need for the Bluestone Summer Camp registration database.

Camper Name _____ Boy _____ Girl _____
Last First

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ Business Phone _____ Email _____

Birth Date _____ Age in June _____ Grade Completed in June _____ Parent's Name(s) _____

1st Camp Choice _____ Date _____ 2nd Camp Choice _____ Date _____

The following questions are designed to help us place campers in groups, plan our program, and provide helpful information to the Camp Director and counseling staff who will be assigned to your son or daughter. Only those directly responsible for your child will have access to this information.

1. Has your child ever been away from home overnight? Yes _____ No _____ Lived in a group outside of your home? Yes _____ No _____
2. My child prefers to play with _____ younger children _____ older children _____ children of his/her own age.
3. Any physical disabilities? Yes _____ No _____ If so, describe _____
4. Is your child bothered with bedwetting? If so, how often? _____
5. Any other particular health problems? Yes _____ No _____ If so, describe _____
6. Would you describe your child as _____ exceptionally athletic _____ average athletically _____ needs extra help athletically?
7. Does your child swim? _____
8. What would you like your child to get out of the camp experience? _____
9. What does your son or daughter want to get out of the camp experience? _____

Years at Bluestone: 20 _____ 20 _____ 20 _____ 20 _____ 20 _____ 20 _____

PARENT'S SUGGESTIONS TO THE COUNSELOR – Please indicate anything else that would be helpful for your child's counselor to know at the bottom of this page.

CAMPER GROUPS Bluestone serves children from many different communities. The success of the camp for your child depends mostly on his or her happiness with in their camper group. It is our policy to group together two friends from the same church or area in our cabins and hogans. In order that the camper and his/her parent may be happy with the grouping, **parents are asked to indicate one friend (a BUDDY) of the same school grade with whom their child would like to be grouped. Please check with the friend to be sure he/she registers for the same camp and date before listing the name.**

Please indicate the name of your child's buddy (ONLY ONE PLEASE) _____

SECTION 2: PARENT/GUARDIAN INFORMATION

Parent/Guardian Name _____ Phone _____

Address _____
Street or P.O. Box City, State Zip Code

Email _____

SECTION 3: HOUSEHOLD INFORMATION

In order for us to assess your financial need please provide us with as much information as possible.

Annual gross household income: (check one)

_____ \$0 – 12,500	_____ \$12,500 – 25,000	_____ \$25,000 – 40,000	_____ \$40,000 – 60,000
_____ \$60,000 +			

Please list the number of people living in your household? _____ Are you currently employed? Yes _____ No _____

If No – Please explain:

Do you have any other campers attending Bluestone Summer Camp from your household? Yes _____ No _____

If so, please list their names here: _____

Are they applying for a scholarship also? Yes _____ No _____

SECTION 4: CHURCH INFORMATION

Are you and/or your child currently members of a church? If so, please list the name, denomination, address, phone number and pastor of the church below.

Church Name _____ Denomination _____

Address _____
Street or P.O. Box City, State Zip Code

Pastor _____ Phone _____

If you do not currently have a church family, how did you learn about Bluestone Camp & Retreat?
