

Camp Sandy Cove



CHRISTIAN CAMPING AT ITS BEST!
SINCE 1950

Summer 2010

Dear Parent,

Thank you for inquiring about the Camp Sandy Cove Scholarship fund. This fund is annually established through the donations of former staff and friends of Camp Sandy Cove. These individuals all know the valuable impact a week at Camp Sandy Cove can have on the life of a child. I hope that we are able to assist you in providing this experience for your child(ren).

It is our goal to provide this camping experience to as many campers as possible, so we request that you cooperate with the following procedures:

- 1. Prayerfully consider the portion you are able to contribute to the camper's fees and indicate this amount on the form provided.** Due to the large number of families in financial need, we are not able to grant full scholarships. *The maximum amount that Camp Sandy Cove will provide for any individual is one half of the camper fee.* The other half must be met by the parent, your church, or other sources. It is also our policy that scholarships are not granted for multiple week stays, with the exception of our Leadership Training Program and extenuating family circumstances. If you are applying for scholarship for more than one week, please provide a detailed explanation of this need.
- 2. If you attend a church regularly, we request that you inquire if they are able to contribute a portion of the camper tuition.** Please have a church representative fill in #2 on the scholarship form and sign where indicated. If you do not attend church, write "not applicable" in the space provided.
- 3. Tell us your current financial situation by completing questions 3, 4, and 5.**
- 4. Return the application form to Camp Sandy Cove along with the registration form and the registration deposit (unless already sent).** We will hold a space for your child in camp and notify you as soon as possible about available funds. If you are unable to attend camp, please notify us immediately, so that available funds may be assigned to another child. If funds are not available we will refund your child's deposit.

We sincerely hope that we will be able to assist your family this summer. Please pray that funds will be provided. Feel free to call me at the Camp Sandy Cove winter office with any questions that you might have.

In Christ,

Tim Nielsen

Tim Nielsen
Director

P.S. All applications and deposits must be received by May 1, 2010 to be considered.



Summer Address (May - September):
RT 1 Box 471
High View, WV 26808-9709
Phone: 304 856-2959 Fax: 304 856-1683

Corporate Address (October - April):
60 Sandy Cove Rd
North East, MD 21901-5436
Phone: 443 674-9454 Fax: 410 287-3196
www.campsandycove.org



REQUEST FOR SCHOLARSHIP ASSISTANCE

**Camp Sandy Cove
60 Sandy Cove Rd
North East, MD 21901
443-674-9454**

THREE STEPS REQUIRED OF EACH APPLICANT:

STEP 1: Thoroughly read the enclosed letter.

STEP 2: Complete this form for each camper applying

STEP 3: Mail this form to Camp Sandy Cove.

Name of Child _____ **Age of Child** _____

Name of Parent or Guardian _____

Address _____

City, State, Zip _____

Home Phone _____ **Work Phone** _____

Church _____

Pastor _____ **Church Phone** _____

1. Portion of camper fee you can contribute for each child \$ _____

Signature of parent/guardian _____

2. Portion of camper fee your church can contribute for each child \$ _____

Signature of church representative _____

3. What is your approximate monthly income and the source of that income?

4. What family obligations are met through your salary? (i.e. #of children supported, regular payments, etc.)

5. Are there any special circumstances that we should be aware of in considering your request?

6. What week of camp are you applying for? Week _____ Date _____

7. Have you already registered for this week? YES NO ENCLOSED

FOR OFFICE USE

Date Received _____ Parent Contribution _____ Church Contribution _____

Date Confirmed _____ SCHOLARSHIP AMOUNT _____