

Application for Camp Calumet Scholarship

Name _____

Date _____

Address _____

Phone _____

What are you most looking forward to by attending Camp Calumet?

What do you hope to gain by attending Camp Calumet?

What do you think might be a challenge for you while attending Camp Calumet?

How might you share your experience with others at Immanuel?

If I receive this grant, I recognize that while attending Camp Calumet, I am representing Immanuel Lutheran Church. I promise to behave appropriately, act responsibly, rejoice loudly, make new friends, and have fun.

Applicant's Signature

Parent/Guardian's Signature