

Lutherdale Campership Request Form



Thank you for choosing Lutherdale for your child's camp experience this summer. We set high standards for our program, and our staff works very hard to ensure a wonderful camp experience. It is Lutherdale's mission that no camper be denied camp for financial reasons. We ask for your help as we try to meet every request and spread our resources.

Step One: Register for Summer Camp!

Register through the Lutherdale website or with a paper registration. When you register you will be asked to put down a \$100 Deposit. If you are unable to pay the deposit at this time, please call the office to make arrangements.

Step Two: Fill out this Form and Return It To The Lutherdale Office.

Camper Name: _____ Parent/Guardian Name: _____

Program Selected: _____ Program Date: _____

Address: _____

City, State, Zip: _____

Phone Home: _____ Work: _____ Cell: _____

Signature: _____

Step Three: Requested Campership Amount

Our hope is that you can cover 1/3 of the Camp Tuition. Registration discounts and special rates are granted for Campership request. If you are choosing to attend a Specialty Camp, you are responsible for paying the activity fee for that program.

Lutherdale Program Fee \$ _____
Amount I/We plan to pay \$ _____
Requested from Lutherdale \$ _____

Step Four: Church Request

Your congregation may be able to provide additional funds to cover the remaining cost of camp. Please fill out the church contact information.

Home Congregation (if not a member of a church, please put "None") _____

Church Address: _____

City, State, Zip: _____

Phone: _____ Pastor's Name: _____ Denomination: _____

Thank you! Once your request has been processed, your balance will change in our system. If you have question, please call the Lutherdale Office at 262-742-2352

Let The Children Come Annual Appeal

Lutherdale believes the camp experience should be offered and available to anyone. To make sure the camp experience is available to all, financial assistance (known as camperships) are available and supported through generous donations for congregations and individuals.

I would like to donate: \$725 (a full week of camp) \$300 \$100 \$50 Other: _____

Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Method of Payment: Check Visa Mastercard Discover

Card # _____ Exp. Date: _____ 3-digit code on back _____

Card Holder Signature _____

Thank you for your support of the ministry of Lutherdale!