Camp Cedar Cliff

Scholarship Application

You will not be considered for financial assistance until you do the following:

- 1. Complete this form in its entirety.
- 2. Make a registration for your camper(s) by visiting www.campcedarcliff.org (click "Register/Login") or by calling our office at 828-450-3331.
- 3. Make a \$75 deposit* for each camper either online or by mailing us a check.

*The \$75 deposit will be refunded if financial assistance is not awarded or if you decide not to accept the financial assistance awarded.

Name of Parent/Guardian:
Name of Camper(s):
Address:
Best phone number(s) to contact you:
As of summer: Age of Camper(s) Grade of Camper(s)
Occupation of Parent/Guardian:
Number of people in household:
Household's annual gross income: (include all child support and government assistance if applicable)
Household's estimated monthly expenses:
Amount you are able to provide towards camp fee (excluding deposit):
Are you sending your child(ren) to any other camps this summer?
Have you received any financial assistance from Camp Cedar Cliff before? Yes No If yes, what year(s)?
Please provide specific details regarding your need of financial assistance and your desire for your child to attend a Camp Cedar Cliff session. <i>Please use a separate sheet of paper</i> .
My child would like to attend Camp Cedar Cliff during the following week:
First choice: Second choice: (Camp Cedar Cliff reserves the right to place your camper into a week that has space available.)
I affirm that all the above information is correct(Applicant Parent/Guardian Signature)
(Applicant Parent/Guardian Signature)
Please email this form to camp@campcedarcliff.org , mail it to Camp Cedar Cliff, P.O. Box 9036, Asheville, NC 28815, or fax it to 828-298-7313. We reserve the right to stop accepting applications at any time.
For Office Use Only Amount of financial assistance granted
Authorized Signature Date