



Confidential Application for Scholarship

If you reside within a zip code that is serviced by our grant donor, *Partnership for Better Health*, you may be eligible for a scholarship. Please visit <http://www.forbetterhealthpa.org/what-we-do/service-area/> for the list of zip codes that are eligible. Unfortunately, scholarships are not currently available to residents outside of these areas.

Applicant (Parent) Name _____ Date _____

Complete Address _____

(Best) Phone _____ Email _____

Student's Name(s) _____

For which program(s) are you applying and how many participants from your family in each:

Jr Tracker & Wilderness Camp, Level 1, Week 1: _____ # of Participants _____

Jr Tracker & Wilderness Camp, Level 2, Week 2: _____ # of Participants _____

Total Annual Income anticipated for this year: \$ _____

(Please include all salaries, public assistance, and other sources of household income for all people in household.)

Total number of adults in household: _____

Total number of children under age 18 in household: _____

Unusual Circumstances- please explain below if there are special circumstances that you would like us to consider when determining the level of assistance for which you qualify (*medical bills, family emergencies, etc.*)

I affirm to the best of my knowledge that the above information is true and complete.

Applicant's Signature _____ Date _____

Please email your completed application along with registration form to Natalie Manchorov, camp coordinator, at NManchorov@yahoo.com, or Mail to Amethyst Retreat Center, 44 Buffalo Creek Rd, Duncannon, PA 17020. We will notify you via email, within 2 weeks from date of receipt, of your eligibility for a scholarship.

Many thanks to our 2020 Jr. camp sponsor!

