



2020 Glisson Campership Application

Glisson camperships are intended for children and youth who would not be able to attend summer camp without assistance. Camperships are also available to those whose families have experienced short-term financial difficulties.

Camperships are awarded based on need. They are not merit awards; they are not intended as merely a convenience or reduction of fees. These funds represent need-based gifts from generous Glisson donors. Awards will be made on a first-come, first-served basis.

To apply for campership, please submit the following:

1. Completed online **summer camp registration***, one for each camper applying for campership. Registration must be completed before any campership award may be made.
2. Completed **campership application**, including the Confirmation of Need section completed by your minister (*preferred*), social worker, school guidance counselor or other professional who is familiar with the camper(s) and family.
3. Registration **deposit** of \$100.00 per camper*. Should Glisson be unable to award a campership for any reason, this deposit will be refunded.

***The Campership Application** is submitted only in paper form by mail or email to registration@glisson.org, whereas **camper registration**, health form and deposit can be submitted either on-line (*preferred method*) or in paper form. On-line registration requires the full \$100 deposit per camper. For campership applicants, Glisson offers the flexibility of submitting the deposit through a series of smaller payments. Contact the Glisson staff at (706) 864-6181 to discuss this option.

Conditions of Campership

- A. Recommendation of a minister (*preferred*), social worker, guidance counselor or other professional is required. This should be an individual who is familiar with the camper and family, but is not a member of the camper's family or household.
- B. Minimum registration deposit of \$100.00 per camper is required (**see box above*).
- C. Cancellation, no-show, and other fee policies apply. These are detailed on the registration page of glisson.org.
- D. Campership recipients may attend only one summer camp session per year. Recipients who register for additional sessions in a given summer will forfeit campership awards.
- E. Camperships will be awarded for any one-week resident Glisson summer camp program.
- F. This program exists to make attending camp possible for children and youth who would not otherwise be able to attend camp without assistance. If you have concerns or difficulty with any part of the campership application process, please contact us.
- G. So that we may assist as many campers as possible, we ask that all families request the lowest possible award level(s) needed to make camp possible for their camper(s).
- H. The camper's family or sponsor will be notified by email of any campership award received and any balance remaining. After notification of the campership award, the family or sponsor may return to the online registration account to pay any remaining registration balance and make a deposit into the camper's online camp sto



2020 Application for Campership

Attach additional copies if you are applying for more than 2 campers

<p>Camper Name: _____ Current grade in school _____</p> <p>Please indicate the level of assistance you are requesting:</p> <p><input type="checkbox"/> Minimal campership: \$100</p> <p><input type="checkbox"/> Half campership: \$290</p> <p><input type="checkbox"/> Full campership: full cost of camp session, minus \$100-per-camper deposit</p>
<p>Camper Name: _____ Current grade in school _____</p> <p>Please indicate the level of assistance you are requesting:</p> <p><input type="checkbox"/> Minimal campership: \$100</p> <p><input type="checkbox"/> Half campership: \$290</p> <p><input type="checkbox"/> Full campership: full cost of camp session, minus \$100-per-camper deposit</p>

Parent Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____ Work phone: _____

Cell phone: _____ e-mail: _____

Number of family members living in your household _____

Total average monthly income of this family \$_____ (optional)

I want my child to enjoy the benefits of the Glisson summer camp experience. My signature below confirms that the information I have provided is accurate to the best of my knowledge, and confirms my understanding of the conditions of campership awards. I am requesting the lowest possible award level needed to make summer camp possible for my camper(s).

Parent /Guardian Signature _____ Date _____



CONFIRMATION OF NEED

*To be completed by a minister (preferred), or a social worker, guidance counselor or other professional who is familiar with the camper(s) and family.
This form should not be completed by a member of the camper's family or household.*

My signature below confirms my relationship to the applicant and my awareness of need expressed in the Glisson Campership Application.

Camper name(s): _____

**My church (or organization) is able to contribute \$ _____,
in addition to any campership awarded by Glisson.**

My relationship to applicant: Minister State Social Worker
 Guidance Counselor Other _____

Signature: _____

Organization name: _____

Printed Name: _____

My title/position: _____

Email address: _____

Date: ___/___/___

My phone number: _____

The Glisson mission

*Glisson joins with the church to make disciples of Jesus Christ,
and to nurture leadership, by creating experiences in Creation
and in Christian community that encourage
transformation, growth and renewal for all people.*