



# Camp LuWiSoMo

South Wisconsin District of the LC-MS  
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## Campership Application

Camp LuWiSoMo makes every effort to keep the prices for summer camp low and affordable. The actual cost to have a camper at camp is approximately \$200 more than the current rates. Donations and sponsors have helped to bridge this gap, but we understand that sometimes this is not enough. We do not want any child to miss an opportunity to come to LuWiSoMo.

There are many ways to raise funds for camp. Here are a few suggestions:

- Ask family (Grandparents, Aunts, Uncles, etc.) to sponsor your child.
- **Ask your pastor for assistance from your congregation or district.**
- **Consider volunteering in LuWiSoMo's Helper of the Week program, through which you receive a discount for your children to attend camp.**

If you have pursued these options and still have a financial need that prevents you from sending your child to camp, please complete and submit this form to the attention of the Executive Director at LuWiSoMo. Thanks to individual donations and funds raised through LuWiSoMo's Golf Marathon, a limited amount of funds is available for camp scholarships . Please note the following:

- All Campership Applications must be received by March 31<sup>st</sup>.
- Camperships do not cover the *additional* costs of specialty camps.
- The Pre-Registration Form and \$100 deposit must be submitted prior to or at the same time as the Campership Application. Campership Applications will not be considered until the completed Pre-Registration Form and deposit have been received.
- We encourage your pastor to send a letter on your behalf and sign this form. If you do not belong to a church, you may still apply for a camp scholarship; simply indicate this on the line below.

Name(s) of Parent(s)/Guardian(s): \_\_\_\_\_

Home Phone: (\_\_\_\_)\_\_\_\_\_

Address: \_\_\_\_\_

Work Phone: (\_\_\_\_)\_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Cell Phone: (\_\_\_\_)\_\_\_\_\_

Camper's Name (add additional lines if necessary)

Campership Requested

Have you received aid from:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$50 / \$100

\$50 / \$100

\$50 / \$100

\$50 / \$100

• Church \$ \_\_\_\_\_

• Family \$ \_\_\_\_\_

Are you interested in the Helper of the Week Program?

\_\_\_ Yes, please send me more information.

\_\_\_ No, I will be unable to volunteer.

Total amount requested: \$ \_\_\_\_\_

What is the employment status of each parent/guardian?

What circumstances have caused your financial need (use back or an attachment if necessary)?

Parent/Guardian Signature (s): \_\_\_\_\_ Date: \_\_\_\_\_

Church & City: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (\_\_\_ No Home Church)

*Camp LuWiSoMo is dedicated to providing faith-growing opportunities in a Christ-centered outdoor ministry setting for all ages to refresh the whole person through the blessings of people, facilities, and God's Word.*