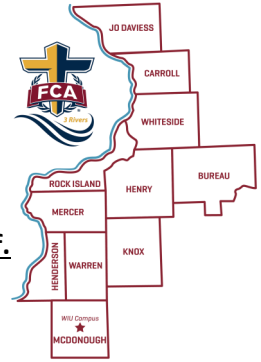




2024 FCA CAMPS Scholarship Application Form



Complete and return your scholarship application to your local FCA Staff.

This is not a camp enrollment form.

You must register for the choice of your camp through the appropriate website.

Parent/Guardian Name: _____ Email: _____

CAMPER NAME: _____ Gender: Male ☐ Female ☐

Address: _____ City/State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

School entering in Fall '24: _____ Grade Level: _____

Year of Graduation: _____ Birth Date: _____ Camper Email: _____

Camp Attending/Requesting Scholarship For:

- ☐ IA Iowa Sports Camp, Pella IA - July 15 through July 19 iowafca.org/pellacamp \$420 or \$510 for Golf ('24 prices)
- ☐ IL Illinois Sports Camp, Jacksonville IL - July 8 through July 11 westernifca.org/camp \$340 ('23 price)
- ☐ MN Minnesota Leadership Camp, St. Paul MN - August 1 through August 4 minnesotafca.org/leadershipcamp \$325 ('24)
- ☐ Other - Please list details: _____

If granted a scholarship for an FCA Camp, the remaining camp registration balance is due before the sign-up deadline date of the particular camp you wish to attend.

PLEASE NOTE: To make our camps available to as many students as possible, FCA may provide limited scholarship help to those who have a legitimate need. The limited funds available will be awarded based upon the applicant's need and in order of the request. Scholarship assistance should also be sought from your local community/church.

Parent/Guardian Signature: _____ Date: _____

Scholarship Amount Requested: \$ _____ Amount of money you will personally contribute: \$ _____

FCA Camps previously attended: _____

Have you received an FCA Scholarship before? ☐ Yes ☐ No Amount Awarded: \$ _____

Briefly share why you are requesting a scholarship? _____

