



King Avenue Church Campership Request

Complete a campership request form for each camper/camp requested.

Please note: Camperships are limited and will be awarded one campership per camper per summer.

Camper's Name:			
Address:			
City:	State:	Zip Code:	
Age: Gra	nde completed in school at end of 2	:018-19 school year:	
Parent/Guardian Name:			
Address:			
City:	State:	Zip Code:	
Parent/Guardian Email:			
Parent/Guardian Phone:			
Circle where your camp will to	ake place:		
Camp Otterbein Camp	Wesley Camp Widewater	r	
Camp Title:			
Camp Dates:			
Campership Request			
Total Cost of Camp/Event:			
Personal Funds (Amount I can	n put towards camp/event):		
Balance Needed (The amount	t of campership funds you are requ	esting.)	_
\$30 Camp Registration Depos	it Needed:		
_	d that available funds are limited, an		
Office use only:	: Date Camper Not		