PNA Junior Camp 2009
Scholarship Application

Name of Applicant: _____

Address:_____

1. **Contact your pastor to apply for a possible scholarship from your church.**

Name of your church:_____

City/State:_____

Our congregation will provide a scholarship in the amount of $_____ for applicant.

Pastor's Signature:_____ Date:_____

2. **If additional scholarship dollars are needed, contact Danna Jones (*spagange@q.com*) to see if PNA funds are still available.**

3. **If you find that scholarships are available, complete the following information.**

Cost of attending PNA Junior Camp is $_____.

$_____ x_____(number of family members attending) =$_____

Amount that I can pay	**minus**	_____
Amount of scholarship from my church	**minus**	_____
Difference	**equals**	_____
Amount of PNA Junior Camp Scholarship I'm requesting		**$_____**

4. **Application Deadline is June 30th. Send this application with the required signatures to:**

Danna Jones
c/o BMCC
912 Sturm Ave
Walla Walla, WA 99362

Parent/Guardian Signature: _____Date:_____

For Camp Staff only

Date Received: _____
Received By: _____

Agreement made: _____

Comments: _____