



## 2022 Scholarship Information

Camp Weed and the Diocese of Florida are happy to award more than \$10,000 in scholarships each year. These awards are made possible by the Bullock Scholarship Fund, founded in memory of Rev. Stanley Bullock, by the proceeds from our Canteen, by offerings at our Closing Eucharist, and by other donations.

A scholarship application must be completed and submitted by April 30 for each individual camper. **Do not put multiple campers on one application.**

Applications may be submitted by email to [randy@campweed.org](mailto:randy@campweed.org) or by mail to:

Camp Weed Summer Camp  
% Randy Winton  
11057 Camp Weed Place  
Live Oak, FL 32060

Providing additional information (tax returns, proof of free or reduced lunch, etc.) is welcome and encouraged. Changes and additional information may be submitted through the channels above any time before the deadline.

Scholarship applications do not serve as camp registration. Your child's spot is not saved by submitting this application. Scholarship awards are based on need and are at the sole discretion of the scholarship committee. Scholarship awards and amounts are not guaranteed.

For additional information, please see our 2022 Scholarship Policies, available on our website.

**This page need not be returned with your application.**

*Applications are due April 30. Our scholarship policies are available on our website. Feel free to provide any supplementary documents with your application.*



## 2022 Scholarship Application

### Parent/Guardian Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Church: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

### Camper Information

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Church (if different from parent/guardian): \_\_\_\_\_

Has this camper attended Camp Weed Summer Camp before?  Yes  No

### Household Information

Please list all people living in your household. (Use back to list more.)

Name	Employer/School	DOB	Relationship

### Financial Information

Please check the box that best describes your annual household gross income range.

Under \$20k  \$20k - \$40k  \$40k - \$60k  \$60k - \$75k  More than \$75k

Does your family qualify for free or reduced lunch?  Yes  No

Does your family have any extenuating circumstances we should consider?  Yes  No

If so, please explain: (attach additional pages if necessary)

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Feel free to provide any supplementary documents with your application.*




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**Please look at the sessions below and use the column on the right to rank sessions in order of preference.** If your camper is ineligible for a certain session because of age or if you there is a session your camper cannot attend, please leave that session blank. We have reserved eight scholarships per session. You can read more about this policy in our 2022 Scholarship Policies, available on our website.

Session	Dates	Age/Grade	Cost	Rank
Mini Camp	June 15-18	6 - 9 years	\$295/\$335	
Senior Session	June 19-25	10th - 12th	\$540/\$580	
Junior Session	June 26-July 2	Rising 8th & 9th	\$540/\$580	
Middler Session	July 3-9	Rising 6th & 7th	\$540/\$580	
Kid Camp 1	July 10-16	3rd - 5th	\$540/\$580	
Kid Camp 2	July 17-23	3rd - 5th	\$540/\$580	
Final Session	July 24-30	Rising 6th & 9th	\$540/\$580	

*Please note: each camper is only eligible for a scholarship for one session. We will not award scholarships for multiple weeks or our stayover sessions.*

Using the costs in the table above, please calculate the amount of financial assistance you are requesting. The first cost is for those registering before March 1, 2022 and received our early bird discount. If you missed any of our discounts, please keep in mind that you can save money next year by registering early.

Because we have many campers with need, we ask that you thoughtfully and prayerfully consider your household's possible contribution. We also ask that you speak with your church to ask them for additional funding.

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Program Cost: \$ \_\_\_\_\_ (after discounts)

- Church Contribution: \$ \_\_\_\_\_ \*

- Household Contribution: \$ \_\_\_\_\_

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Total Amount Requested: \$ \_\_\_\_\_

*Please note: We cannot guarantee that you will receive this amount.*

*\*In accordance with our policies (available on our website) we may contact your church to ask for additional funding if we cannot provide your desired amount.*

Will your camper still be able to attend camp if he/she does not receive a Diocesan scholarship?

Yes  No

*When answering these questions, please consider alternate sources of funding you could find in the event we were unable to offer a scholarship.*

I, the parent/guardian of \_\_\_\_\_ certify that the information above is correct to the best of my knowledge. I understand that Diocesan funds are limited and scholarships are awarded at the discretion of the scholarship committee. I have prayerfully and thoughtfully considered our application for assistance.

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Parent Printed Name

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Parent Signature

**FOR OFFICE USE ONLY**

Requested Amount: \$ \_\_\_\_\_ Suggested Amount: \$ \_\_\_\_\_ Final Amount: \$ \_\_\_\_\_

This parent/guardian has been contacted.

Additional Notes:

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