Enter His Gates Scholarship Form 2024

Name of Camper: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_

Parent/parents/guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

School camper attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First time camper: \_\_\_ Yes \_\_\_ No

Week requesting scholarship: \_\_\_\_\_\_\_\_\_\_

Family income in 2023: \_\_\_\_\_\_\_\_\_\_

Tax return in 2023: \_\_\_\_\_\_\_\_\_

**You may be asked to speak with a member of our staff. We will reach out after reviewing your application. Please fill out a camp application along with this form. Thank you for applying!**