

# GREEN VALLEY BIBLE CAMP

# 2017 REQUEST FOR CAMBERSHIP

**EXPECTATION OF CONFIDENTIALITY:** REQUEST FOR CAMBERSHIP—WHETHER APPROVED OR DENIED—WILL BE KEPT CONFIDENTIAL BETWEEN PARENT/GUARDIAN, INDIVIDUAL REQUESTING THE CAMBERSHIP (IF DIFFERENT THAN PARENT/GUARDIAN), AND THE REGISTRAR.

Place an "X" by the session camper wants to attend.

Overnight Camp (\$120 fee; Age 11 by Oct. 1 thru 2017 High School graduates)							
<input type="checkbox"/>	1	6/4–6/10	Todd Miller, Bentonville, AR	<input type="checkbox"/>	6	7/9–7/15	Marshall Brown, Bentonville, AR
<input type="checkbox"/>	2	6/11–6/17	Danny Boggs, Neosho, MO	<input type="checkbox"/>	7	7/16–7/22	Bill McFarland, Springfield, MO
<input type="checkbox"/>	3	6/18–6/24	Robb Hadley, Farmington, AR	<input type="checkbox"/>	8	7/23–7/29	Jon Hendrix, Harrison, AR & Bob Deffenbaugh, Cassville, MO
<input type="checkbox"/>	4	6/25–7/1	Jason Sparks, Watauga, TX	<input type="checkbox"/>	9	7/30–8/5	Scott Ware, Springdale, AR
<input type="checkbox"/>	5	7/2–7/8	Craig Frost, Clarksville, AR				

Day Camp (\$60 fee; completed first grade thru 11 years old)							
<input type="checkbox"/>	1	6/12–6/15	Dennis Coberley, Pineville, MO	<input type="checkbox"/>	3	7/17–7/20	Matt Wilson, Fayetteville, AR
<input type="checkbox"/>	2	7/3–7/6	Craig Frost, Clarksville, AR	<input type="checkbox"/>	4	7/31–8/3	Scott Ware, Springdale, AR

High School Retreat (\$40 fee; high school grades only)			
<input type="checkbox"/>	1	8/18–8/20	Andy Brazle, Rogers, AR

### CAMPER INFORMATION

Camper Name	Gender	Age	Next School Grade	Rec'd Camperships Before?	Previous Camperships Portion of Cost Covered (check closest)	What Portion of This Year's Cost Can Family Cover? (fees above)
	M F			Y N What Year(s)?	___ Less than 1/2 ___ 1/2 or more ___ All	___ None ___ Less than 1/2 ___ 1/2 or more but not all
	M F			Y N What Year(s)?	___ Less than 1/2 ___ 1/2 or more ___ All	___ None ___ Less than 1/2 ___ 1/2 or more but not all

### PARENT/GUARDIAN INFORMATION

Parent/Guardian Names: \_\_\_\_\_ Parent/Guardian E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### CAMBERSHIP REQUESTED BY

Print Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Camper: \_\_\_ Parent/Guardian \_\_\_ Minister \_\_\_ Camp Director \_\_\_ Church Member \_\_\_ Other: \_\_\_\_\_

Please briefly explain why you are requesting Campership: \_\_\_\_\_

### SUBMITTING CAMBERSHIP

FAX or SCAN/SEND/EMAIL completed Request for Campership form AND a completed 2017 GVBC Application for each child.

EMAIL: [registrar@greenvalleybiblecamp.com](mailto:registrar@greenvalleybiblecamp.com) FAX: 866-289-6146

<p><b>REGISTRAR ONLY:</b></p> <p>Campership approved? Y or N Partial Amt: _____ Full Amt: _____ Notes: _____</p>
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