

LGO Break Camp Scholarship Request Form

Return to:
Camp Tekoa
PO Box 1793
Flat Rock, NC 28793 or fax: 828 697 3288

This form must be signed by custodial parent/guardian.

Camper's Full Name: _____

Event Attending: _____ LGO Spring Break Camp _____ Date Attending: _____

Parent Name(s): _____

Statement of financial need: _____

Why do you feel attending Camp Tekoa will be beneficial to your child? _____

Scholarship Amount Requested? _____

Phone number where you can be reached: _____

Email Address: _____

Signature of Custodial Parent/Guardian: _____

Office use only: Scholarship Rewarded: _____

Acceptance Policy: Persons are accepted without discrimination on the basis of race, color, sex, age, religion or national origin. All campers are expected to be ambulatory and able to feed, clothe, and bathe themselves. Facilities are rustic: terrain and programs are rugged.