



REQUEST FOR LUTHERLYN CAMBERSHIP

- **We urge you to request only the amount of the actual need.**
- All requests are based on financial need. We depend entirely upon the judgement of the pastor and/or parent/guardian that makes the request. It may be necessary to limit camperships to certain weeks and/or programs.
- If you have questions, please contact Lutherlyn at 724-865-2161 or registrar@lutherlyn.com.

Name of Camper	Program and Week	Amount Requested
(Example) Bob Smith	Classic Juniors, Week 7	\$80.00

Please use one form per family.

REASON FOR REQUEST:

Parent/ Guardian _____ (Print Name) _____ (Signature)

Phone # _____ E-Mail _____

If applicable:
Home Congregation _____ Church Phone # _____

Pastor _____ (Print Name) _____ (Signature)

Return to: Lutherlyn, P.O. Box 355, Prospect, PA 16052