

Dear Scholarship Applicant,

We understand it can be difficult to raise a family in these hard economic times, especially if you are a single parent or a single income family. Our desire is to give every child the opportunity to attend camp and we will gladly assist any family with a financial need. Scholarships are available for Wild West Camps. However, there are limited scholarships for specialty camps (Horse and Wilderness Camps) for up to 50% of the camp fee based on availability. Please contact our office (814) 664-7673 for a special code for these camps prior to completing the scholarship application.

The enclosed material is set up so that we can make the best judgment in the distribution of the scholarship funds the Lord has provided. Please carefully read the guidelines on the back before filling out the application. When you fill out the application, please indicate the total amount you are able to pay (including deposit). After you fill out the application, please return it along with the **Rancher Registration Form**, where you will be able to indicate your 1st, 2nd, and 3rd choice of camp week, as well as a \$75.00 deposit. If you cannot afford the deposit, please explain so in your statement of need.

Also enclosed are two reference forms to be filled out by your pastor and a friend. Please have these individuals fill out and return the references to our office in the enclosed envelopes as soon as possible so we can start processing your application. If you are not attending a church regularly, you may have a second friend fill out the other reference.

Thank you for your application. We look forward to seeing you at camp!

Sincerely In Christ,

Noelle Miner Registrar Heidi Halcomb Financial Aid

Miracle Mountain Ranch Scholarship Application

Applicant's Name:					
Parent or Guardian:					
Address:					
City:					
Age: Gender (circle of	one): Male / Female	Phone: ()	-	
Specialty Camp Code:	(must be obtained	through the office	e for Horse and Wile	derness camps prior to app	olying)
Week of Camp Desired:	1st Choice				
	2nd Choice				
	3rd Choice				
Church Affiliation (if any):					
Pastor/Leader:					
Church address:					
Church phone: ()					

Please indicate the amount you could pay toward the total fee of the desired week of camp: \$______ We ask that everyone try to pay the \$75 deposit. However, if you cannot afford that, we ask you pay something, even if it is only \$15 per child. If not, please indicate \$0.00. (Leaving this blank will slow the application process.)

REFERENCE: Included are two reference forms. Please distribute them to your references and have them return the forms to our office as soon as possible. If you are not attending a church regularly, you may make a copy of the Friend / Family reference and use a second person as a reference. Also have your pastor and friend fill out the communication information below.

Pastoral reference general information:

Name:	
Address:	
City:	
Association w/ Ref.:	Phone:
end / Family reference general inform	nation:
and / Family reference general inform Name:	
end / Family reference general inform Name:	
Name:	

<<<< PLEASE READ THE GUIDELINES ON BACK >>>>

Miracle Mountain Ranch Scholarship Program & Guidelines

PLEASE READ CAREFULLY

1. Scholarships are generally available for Wild West Camps. However, there are limited scholarships for Specialty Camps (Wilderness and Horse Camps) for up to 50% of the camp fee, based on availability. A specialty camp code must be obtained prior to applying for a scholarship and does not guaranty scholarship approval. We do not scholarship Adventure Options such as Paintball, Overnighter, or Breakfast Trail Rides.

Scholarships are NOT available to anyone attending more than one week of camp.

- 2. In order to be considered for scholarship funds, a written request must be made to the Registrar, explaining the basis for need. No application with genuine need will be refused as openings and funds are available.
- 3. We encourage each applicant to try using other discount programs first. Many churches will assist with scholarships to summer camp. Applicants should also try our other existing discounts, as well: Early Registration discounts, Group discounts, and Multiple Family discounts.
- 4. Each applicant will be asked to determine what amount they can pay toward the total cost, the minimum being \$75.00. Please do not leave this blank. Under special circumstances, we can waive the \$75.00 registration fee, but such a waiver must be appealed for in your financial need statement.
- 5. Each applicant is requested to submit two reliable, written references to confirm their need to the camp administration. MMR encourages the applicant to use their church leaders or other persons associated with MMR as references.
- 6. Those receiving scholarship aid may be asked to attend a week of lower registration. Please be sure to mark a 1st, 2nd, and 3rd choice.
- 7. Scholarships are awarded according to need, sincerity of interest, registration openings, and sponsorship. As MMR and individuals are responsible for providing scholarship money, you may be asked to write an appropriate and courteous thank you.
- 8. REASON FOR FINANCIAL NEED: Please attach an outline of your financial need for a camp scholarship, and any efforts you have made towards earning funds or taking advantage of discounts presently offered.

I have read the guidelines for the Scholarship and willingly comply according to the spirit of the Scholarship program.

Signed:

Parent or Guardian Date: / /

Miracle Mountain Ranch Scholarship Program 101 Rodeo Dr., Spring Creek, PA 16436

Pastoral Reference

Name of Applicant:

The following questions are asked to help Miracle Mountain Ranch make the best judgment possible in the distribution of scholarship funds. Our desire is to assist as many people as possible who have financial needs to come to camp and share a Christ-centered experience. We appreciate your willingness to take the time to fill out this form.

1. How long ha	ave you known	the applicant?					
2. Does the app	plicant or his/he	r parents atten	d your chur	ch on a regulai	basis?		
3. How would	you rate the app	plicant's need	for financial	assistance?			
□ Great	□ Fair	□ No No	eed □	Unable to an	swer		
4. How would	you rate the app	olicant in relati	ionship to st	ewardship?			
	ent 🗆 Av	erage 🗆	Poor 🗆	Unable to a	nswer		
•	hurch provide a	•	os or have ot	her methods to) assist a fa	amily in	sending their
-	e applicant appl your church coi	_	_		-		
	ould your chur week of camp i						
If you or the ch		be a sponsor, I the amount					that you can
6. How much c	lo you feel the a	applicant could	d afford to p	ay toward a we	eek of cam	ıp?	
□ \$75 - \$15	0 🗆 \$150	- \$225	□ \$225 - \$3	00 🗆 U	nable to an	iswer	
7. How do you	think the appli	cant would ber	nefit from a	Christian cam	ping exper	ience?	
8. Additional C	Comments						
Name:					Date:	/	/
Church:				Title:			
Church Address:							
City:			State:	Zip	:	+4	
Phone: ()	-						
	Mi	racle Mountair	n Ranch Sch	olarship Progr	am		

101 Rodeo Dr., Spring Creek PA 16436

Friend / Family Reference

Name of Applicant: _____

The following questions are asked to help Miracle Mountain Ranch make the best judgment possible in the distribution of scholarship funds. Our desire is to assist as many people as possible who have financial needs to come to camp and share a Christ centered experience. We appreciate your willingness to take the time to fill out this form.

1. How long have you known the applicant? 2. What is your relationship to the applicant? 3. How would you rate the applicant's need for financial assistance? Unable to answer П Great Fair \Box No Need 4. How would you rate the applicant in relationship to financial stewardship? \Box Average \square Poor П Excellent \Box Unable to answer 5. Would you or your family consider cosponsoring the applicant, along with MMRM? If yes, how much would you be willing to sponsor? \$ (Fee for a week of camp is \$299.00 for Wild West Camp) If you are able to be a sponsor, MMRM will send you a sponsorship card that you can return with the amount with which you are willing to assist. 6. How much do you feel the applicant could afford to pay toward a week of camp? □ \$150 - \$225 □ \$225 - \$300 □ \$75 - \$150 \Box Unable to answer 7. How do you think the applicant would benefit from a Christian camping experience? 8. Additional Comments: Name: _____ Date: / / Address:
 City:

 Zip:
 +4_____
 Phone: (_____) -

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