



OSU/Lane County Extension Service 4-H Program Leader's Association
2008 Campership Application

Please return application by Monday, June 30th to be considered for a campership.
Available camperships will be awarded on a first come, first served basis.
First time campers will also be considered for these camperships.

GENERAL INFORMATION

Camper's Name (First & Last): Home Phone:

Parent(s) OR

Guardian(s) Name (First & Last): Work Phone:

Address: City: Zip:

Campers 2007-08 Grade In School 3rd 4th 5th 6th Is the camper a 4-H member?

School Camper Attends:

Reduced fee lunch program? Yes No Free lunch program? Yes No

Has the camper attended 4-H camp before? Yr. Received a campership? Yr.

Are there unusual financial situations that would contribute to your child's need for a campership?
Please use the back if you need additional room.

Blank lines for providing additional information.

I certify that the above information is true and correct and give permission for the OSU/Lane County Extension Service to verify this information.

I am enclosing a deposit of \$ (Fully refundable if a campership is not awarded.)

Signature of Parent or Guardian

Date

Please provide contact person if English is not your spoken language.

Name

Relationship

Phone