

**Madison County \$50.00 4-H Camp Scholarship  
Application Due – May 1<sup>st</sup> the OSU Extension Office**

**Personal Information**

Camper's Name: \_\_\_\_\_ Age (1/1/23): \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Home or Cell Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_

**Previous Camp Experience:** Have you ever attended 4-H camp before? No \_\_\_ Yes, for \_\_\_ years

**Camp Information**

Do you have any brothers or sisters attending 4-H camp this year? No Yes  
If yes, what are their names and ages: \_\_\_\_\_

Why do you want to go to camp? (200 words or less written by the 4-H member)

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**Camper Signature:** \_\_\_\_\_

**Financial Need Statement:** Why does your child need financial assistance to attend camp? (50 words or less written by parent/guardian)

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**Parent signature:** \_\_\_\_\_

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