

# ANGEL TREE CAMPING SCHOLARSHIP APPLICATION



Prison Fellowship Angel Tree™ is pleased to provide scholarships to allow children with incarcerated parents or stepparents to attend camp at little to no cost. **Please fill out one sheet per family.**

Name of Camp that Child will be Attending \_\_\_\_\_

## CAREGIVER INFORMATION

Parent/Caregiver's Name \_\_\_\_\_

Parent/Caregiver's Address \_\_\_\_\_

Parent/Caregiver's Phone Number \_\_\_\_\_ Parent/Caregiver's Relationship to child \_\_\_\_\_

## INCARCERATED PARENT'S INFORMATION **(Must be complete name and last known facility or facility released from for scholarship purposes.)**

Incarcerated Parent's Name \_\_\_\_\_

Incarcerated Parent's Last Known Location: Prison Name \_\_\_\_\_ State \_\_\_\_\_ Year Released (If applicable) \_\_\_\_\_

*\*This information WILL NOT be shared with the child.*

When participating in the Angel Tree® associated camp (the "Camp"), I acknowledge that my child may be photographed for print, videotaped, or electronically imaged (Images) and that my child's first name and biographical information, and/or comments and quotes may be obtained (Statements); and that such Images and Statements (Materials) may be used by Prison Fellowship and/or the Camp in promotional materials, news releases, websites, and other published formats. I hereby release Prison Fellowship and the Camp, and anyone working on their behalf from any and all liability, claims, and causes of action that I might have arising out of the use of such Materials, to include rights of publicity and privacy. The Materials will be the sole property of Prison Fellowship and/or the Camp. I also acknowledge and understand that as the Caregiver, it is my sole decision to permit my child to participate in a camping program, to select the Camp that is right for my child, and to ask questions of the Camp as to suitability, including information on the Camp's programs, values, child safety guidelines, counselors, activities, and any special needs my child may have.

Caregiver's Signature \_\_\_\_\_ Date \_\_\_\_\_

## CHILDREN'S INFORMATION

Child's Name \_\_\_\_\_

Name of Camp Attending \_\_\_\_\_ Date of Camp Attending \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

*Please check appropriate box.*

Has the child ever received a Christmas gift through Angel Tree on behalf of their incarcerated parent?    Yes    No

The child does not have an incarcerated parent but lives in the same household with another child who has an incarcerated parent.  
(Check the box if this statement is true.)

The child does not have an incarcerated parent and does not live in the same household with another child who has an incarcerated parent.  
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CHILDREN'S INFORMATION *continued*

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