



BRIDGES
community church



505 Driscoll Road
Fremont, CA 94539
Telephone: (510) 651-2030

STUDENT MINISTRIES NEEDS BASED ASSISTANCE APPLICATION

To Be Completed By Parents

We want to do everything we can to help your student experience a great time at this event. Parents should complete all sections of this application with their student, and return to the Student Ministries office by the appropriate registration deadline along with the respective registration form.

Need based assistance is provided to students with difficult financial situations. Assistance is offered at 3 different levels

1. *Full assistance for extreme needs through a student scholarship (reserved for deserving students)*
2. *Discounted payment (i.e. a reduction of the overall costs)*
3. *Student loan for either the full or partial event fees, based on a formal and agreed payment plan*

Parent Information

Last Name: First Name: Middle Initial:

Address:

City: State: Zip:

Home Phone: Work Phone: Cell Phone:

Email:

Student Lives With? : [] Mother [] Father [] Both Parents [] Other (*please specify*)

Number and Ages of Other Children in your Household:

Name: Age: Name: Age:

Name: Age: Name: Age:

Student Information

Last Name: First Name: Middle Initial:

Address (*if different from parent*):

City: State: Zip:

Home Phone: Work Phone: Cell Phone:

Email:

Date of Birth:/...../..... Grade: [] Male [] Female

Student Statement (*Please tell us why you want to go on this event. Describe any services or volunteer work you have done in the past 6 months either at church or in your community*):

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.....

Student Signature: Date:/...../.....



Recommendations

Please include TWO recommendations that are not family or relations6 (teachers, counselors, other significant adults) that can verify student standing and this request.

Recommendation 1: Name: Relationship to Student:

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Signature: Date:/...../.....

Recommendation 2: Name: Relationship to Student:

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Signature: Date:/...../.....



Financial Requirements

Name of Camp or Event Student will be attending:

How Long Have You and/or Your Student Been Attending Bridges Community Church?

Cost of Event or Activity: What Amount Can You Contribute?

Family Income Source: [] Single [] Dual

Does Your Student Work? Approximate Hours Per Week:

Parent Financial Statement (Please describe your reason for need based assistance at this time (e.g. loss of job, financial hardships, etc.):

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Payment Plan (For your financial portion, please provide a payment plan of what payments will be made when, how often, etc.

PLEASE NOTE - we do suggest a minimum deposit of 25%):

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Parent Signature: Date:/...../.....