

## **CONTACT INFORMATION**

Parent/Guardian Name(s):
Primary Phone Number: Home Cell
Address:
City/State/Zip:
Primary Email:
Status:  Single  Married  Separated
STUDENT INFORMATION
Full Name
Relationship to you
Age DOB Gender
Name of church:
Typical attendance?  Weekly  Monthly  Other
What impact do you hope this camp will have on your student?
Has the applicant been to Mind Games before? □ Yes □ No If so when?
How did you hear about Mind Games? □ Friend □ Brochure □ Website □ Radio □ Other
2001 W PLANO PKWY, STE 2000   PLANO, TX 75075   972.941.4565   INFO@PROBE.ORG Page 1 of 3

How did you hear about the scholarship program?	[Be specific]
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TUITION Registration fee: \$695 Alumni Registration: \$625	Optional Ropes Course Recreation Fee: \$25		
Amount you can pay	Amount requested		
PAYMENT INFORMATION			
🗆 CREDIT CARD [ VISA   MASTE	ERCARD ]		
Name on Card			
Card #	Check #		
Ехр	Amount		
Signature:	Date:		
HOUSEHOLD INFORMATION			
<ul> <li>Does anyone in your household work in full-time ministry? □ Yes □ No</li> </ul>			
If so, please describe:			
<ul> <li>Do you have relatives and/or church members who will assist you in paying for camp? □ Yes □ No</li> <li>If so, how much?</li> </ul>			
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• Is this a foster care situation? □ No □ Yes

Caseworker Name	
Phone	
Address	
City	_ State Zip

## SCHOLARSHIP APPLICATION CHECKLIST

ALL ITEMS MUST BE COMPLETED BEFORE APPLICATION WILL BE REVIEWED.

- 1. Amount you can pay on form
- 2. Amount requested on form
- 3. 1-page written statement as to why you think Mind Games will benefit your student and why he or she is worthy of the scholarship

Please mail form and attachments to:

Probe Ministries Mind Games Camp STE 2000 2001 W Plano Pkwy. Plano, TX 75075

Or Scan and Email to: sue@probe.org