

Awana Scholarship Request Form 2017-18

Welcome to AWANA at Central Baptist Church. We are thrilled to have your child be part of our program. It is our desire that each family and child have a vested interest in AWANA. It is also our intent to provide the life changing benefits of AWANA to your child regardless of your ability to participate financially. With this in mind, we have established a scholarship program to provide needed assistance.

Please provide the name, the age of each child you will have in the program and indicate how much you can contribute towards the cost of your child's participation. We will then contact scholarship donors and secure for you the assistance needed. We look forward to an amazing AWANA experience with your child.

Please turn in this completed Scholarship Request Form to one of our AWANA secretaries or to the AWANA Commander.

Your Name: _____

Child's Name: _____ Age: _____ Cost: _____

Child's Name: _____ Age: _____ Cost: _____

Child's Name: _____ Age: _____ Cost: _____

Child's Name: _____ Age: _____ Cost: _____

Total Costs: _____

I can contribute \$ _____ toward my child's AWANA membership.