



SCHOLARSHIP APPLICATION RECOMMENDATION FORM

Reference Name: _____

Phone Number: _____

Name of Applicant: _____

What is your relationship to the applicant? _____

Please comment on the specific ways you believe this applicant will benefit from having the opportunity to take part in summer camp at Camp Yamhill. Feel free to type your recommendation if desired.

Signature

Date

**MAIL COMPLETED APPLICATION TO:
CAMP YAMHILL
19651 NW OLD RAILROAD GRADE ROAD
YAMHILL, OR 97148
OR FAX TO: 503.662.3349**