

Scholarship Request Form

(Scholarships are intended for Dorm Rooms)

Name of Event: Women's Retreat

Event Date(s): May 1-3, 2020

Cost of Event*: _____ Your Portion: _____ Balance Requested: _____

Name of Scholarship Recipient: _____

Person Requesting: _____ Relationship to Recipient: _____

Daytime Phone: _____ Email: _____

How did you find out about the Women's Retreat? _____

Reason for Request: _____

Today's Date: _____

Signature

Please fill out and return to the Redeemer's Fellowship office in person or by mailing to:

Redeemer's Fellowship Women's Retreat
ATTN: Patrice Glasscock
729 SE Jackson St
Roseburg, OR 97470

Or fax: 541.440.0760

Questions in regard to the retreat can be directed to:

Myrt Thames, Women's Ministry
541.784.5250
myrtster@gmail.com