

Scholarship Application – Mission u July 25-27, 2024

**Scholarships are available for registration ONLY up to \$125.
Please check with your Local Church/UWF Unit and District UWF first.**

APPLICANT NAME: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

PHONE: (including Area Code) Home or Cell: _____

Email _____

Name and location of the Church you attend: _____

Do you plan to share what you learn with others in your church? _____

- First time attending Mission u? Yes No
- Children 8-12 are free with a parent or grandparent
 - Youth 13-17 (all are eligible for the full \$125 scholarship)
 - 18-35 36-55 56 and older

**Scholarship checks from your local church, UWF unit, or district
should NOT be mailed with this Scholarship Application.**

They should be mailed to the Mission u Business Manager at:

**Carol Gruen
2205 Lakemoor Dr. SW
Olympia WA 98512
gruenw@comcast.net**

Please list any funds you are receiving from:

Local Church name _____ amount \$ _____

Local UWF unit name _____ amount \$ _____

District UWF name _____ amount \$ _____

Personal Check amount \$ _____

Total\$ _____

Mission u scholarship amount that you are requesting up to \$125 _____

**Please complete and mail this Scholarship Application
and your Registration form by **June 30, 2024.****

To: Linda Mills,
12431 SE 198th Pl, Kent, WA 98031
Email: wmil1218@aol.com — Phone: 253-859-2964