

SPONSOR-A-CAMPER PROGRAM

C R E A T I V E



SCHOLARSHIP FUND

SUPERSTAR \$5,000+

GUEST STAR \$1,000+

CO-STAR \$2,500+

DAYPLAYER \$500+

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ E-MAIL _____

Enclosed is my/our gift in the amount of \$ _____.

Mastercard American Express Visa Check

CARD NO. _____ EXP. DATE _____

SIGNATURE _____

My corporate matching gift form is enclosed