Scholarship Application — MISSION U, JULY 21-23, 2023

Scholarships are available for registration ONLY up to \$125. Please check with your Local Church/UWF Unit and District UMW 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 w	vith others in your church?	Yes No D	
First time attending this event: Age Group–Children 8 to 11 are from	· ` ·	uth are eligible for the f	
Scholarship checks from your le Scholarship Application	cal church, local UWF unit, on they should be mailed to the Carol Gruen 2205 Lakemoor Dr. SN Olympia WA 98512 gruencl1941@gmail.co	ne Mission u Business	
Please list any funds you are receiving	g from:		
Local Church name		amount \$	\$
Local UWF unit name		amount \$	5
District UWF name		amount \$	S
	Perso	onal Check amount of \$	S
		Total \$	S
Mission u so	holarship amount that you are r	equesting is up to \$125	5

Please complete and mail this Scholarship Application form along with your Registration Form by June 30, 2023.

To: Linda Mills, Registrar 12431 SE 198th Pl, Kent, WA 98031 Email: wmil1218@aol.com if you have questions

Phone: 206-399-2302