



# OWjL Camp

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

How are you connected to OWjL? \_\_\_\_\_

**Yes! I want to support the OWjL program.**

**Enclosed is my tax-deductible donation.**

- Quarter-tuition scholarship - \$187
- Half-tuition scholarship - \$373
- Full-tuition scholarship - \$745
- Class sponsorship (1 week) - \$500
- Evening program support - \$800
- Other \_\_\_\_\_ - \$ \_\_\_\_\_
- My employer will match my donation; form included  
Employer name: \_\_\_\_\_

**Thank you for your support.**