

## Brookhaven's Direct Scholarship Program

*Please make a copy for each person interested in giving if individual tax receipts are required, or combine all gifts into one if only one receipt is necessary. Mail, fax, or e-mail the form to Brookhaven Retreat.*

I/We would like to scholarship \_\_\_\_\_ child(ren) for camp in the amount of \$189 per child.

Enclosed is a check for \$\_\_\_\_\_.

Name (individual or group) \_\_\_\_\_

Organization \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Address \_\_\_\_\_

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

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## Brookhaven's Pay It Forward Program

*Pay It Forward Weekends Available (Up to two nights and four meals: Please check a date and indicate your lodging preference; mail, fax, or e-mail the form to Brookhaven Retreat, then Brookhaven will contact you to confirm details):*

- |                                       |  |  |   |
|---------------------------------------|--|--|---|
| <input type="checkbox"/> March 7-9:   | <input type="checkbox"/> Motels (30-94 people) | <input type="checkbox"/> Lodge (16-40 people)        | <input type="checkbox"/> Dorm (50-136 people) |
| <input type="checkbox"/> March 14-16: | <input type="checkbox"/> Motels (30-94 people) | <input checked="" type="checkbox"/> Lodge (reserved) | <input type="checkbox"/> Dorm (50-136 people) |
| <input type="checkbox"/> March 21-23: | <input type="checkbox"/> Motels (30-94 people) | <input checked="" type="checkbox"/> Lodge (reserved) | <input type="checkbox"/> Dorm (50-136 people) |

Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Phone \_\_\_\_\_

Contact E-mail \_\_\_\_\_

Contact Address \_\_\_\_\_

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

Please send completed forms to Brookhaven Retreat • 748 CR 3909 • Hawkins, TX 75765  
Fax: 903.769.4647 • [info@brookhavenretreat.org](mailto:info@brookhavenretreat.org)