

# CAMP WAR EAGLE

## CAMPER QUALIFICATIONS FOR SUMMER 2026

Camper First and Last Name: \_\_\_\_\_ Camper Grade: \_\_\_\_\_

### First Year Camper

☒ School Behavior

### Second or Third Year Camper

☒ School Behavior

☒ Volunteer Time  
or  
Community Involvement

### Fourth or More Year Camper

☒ School Behavior

☒ Volunteer Time

☒ Community Involvement

To attend Camp War Eagle, each child will earn their way to Camp by excelling in school and investing in their community. These qualifications must be submitted to Camp War Eagle to be considered for acceptance. Completing minimum requirements does not guarantee your enrollment. The completion of additional qualifications is encouraged and will be considered in the enrollment process.

## SCHOOL BEHAVIOR AND ACADEMICS

This is required for every camper application. Must be signed by a teacher or school counselor.

*Camper exhibits good behavior and cooperates well with students and faculty. Camper is able to function independently in a camp setting. If the camper appears to have any serious behavioral issues or special circumstances that might prevent him/her from living and interacting cooperatively with others, please contact Camp War Eagle.*

Comments: \_\_\_\_\_  
\_\_\_\_\_

*Camper maintains a minimum "C" average and exhibits good effort.*

Comments: \_\_\_\_\_  
\_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

## VOLUNTEER TIME

10 hours minimum required for all ages.  
Must be signed by an adult supervisor.

Project: \_\_\_\_\_  
\_\_\_\_\_

Date of Project: \_\_\_\_\_ Hours Completed: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

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

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

*For additional volunteer opportunities, visit [cweozone.com/serve](http://cweozone.com/serve) or [campwareagle.org/volunteerhours](http://campwareagle.org/volunteerhours).*

## COMMUNITY INVOLVEMENT

Regular participation in OZONE, sports, clubs, scouts, etc.  
Must be signed by an adult supervisor.

Organization: \_\_\_\_\_

How often do you meet: \_\_\_\_\_

Does the child regularly attend: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

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

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

*10 hours of extra Volunteer Time may count for Community Involvement if involvement is not possible.*

