

Schooner... more than just a tall ship!

Scholarship Application - Summer SEA Camp 2012

Schooner offers a limited number of scholarships for children who need financial assistance to attend summer camp. **Applying for this scholarship implies that you can provide the following:**

- proof of financial need
- parent/guardian narrative
- transportation to/from camp
- camper narrative
- lunch/snacks
- parent evaluation
- camp supplies
- camper evaluation
- \$50/week Parent Contribution

Eligible applicants will be accepted on a first come, first served basis - not all applicants are guaranteed scholarship and/or placement in a program. Contact our staff for more information at 203-815-5046.

Participant Name: _____ Age: _____ Male / Female

Date of Birth: _____ Grade (Sept '12): _____ School: _____

Parent/Guardian Name(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail: _____

Camp Program:

Camp Name: _____ Session Date: _____

Please Attach:

Document(s) that display financial need (one or more)

- State Welfare, Social Security, 2011 Federal Income Tax Return, etc.

Parent Narrative "Why my child should receive a scholarship to attend Summer SEA camp."

Child Narrative (or Picture for Younger Children) "Why I want to go to Summer SEA camp."

All documents must be submitted in order to be eligible for a scholarship.

By your signature below, you indicate that you agree to the requirements detailed above and that the information provided is true.

Signature

Date

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SUMMER SEA CAMP 2012 - SCHOLARSHIP REGISTRATION

This registration form will ONLY reserve your child's camp slot IF you are awarded a scholarship.

IF you are awarded a scholarship, there are three more things to do online:

1. Fill out the required emergency & camper information online
2. Get a Health Exam Record from your Doctor
3. Make payment of your \$50/week Family Contribution within 3 weeks of receiving your award

YOU MUST HAVE ONLINE ACCESS AND AN EMAIL ADDRESS TO RECEIVE A RECEIPT AND COMPLETE THE REGISTRATION*

Camper Name: _____ Date of Birth _____ Grade (fall 2012) _____

Address: _____

Parent/Guardian Name(s): _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Camp (ALL CAMPS ARE FULL DAY – Monday-Friday 9AM-4PM): Choose Camp and indicate week(s)

Sea Squirts (PreK-K) _____

Sea Sprites (Gr 1-2) _____

Sea Otters (Gr 3-4) _____

Sound Explorers (Gr 5-8) _____

Coast Quest (Gr 7-12) _____

Opti Sailors (Gr 4-6) _____ (2 week sessions)

Flying Juniors (Gr 7-12) _____ (2 week sessions)

Please return this form to the address below with your completed Scholarship Application.

THIS FORM IS NOT TO BE SUBMITTED EXCEPT AS A PART OF A COMPLETE SCHOLARSHIP APPLICATION