

SCHOLARSHIP REQUEST FORM

We want every interested child to be able to participate in the Bolinas-Stinson Summer Camp. To make that possible, we actively solicit scholarship funding from local individuals and businesses.

Unfortunately, scholarships are limited, based on the generosity of camper families and local agencies. To stretch scholarship dollars, we seldom award more than 25-75% of total tuition.

For more information about scholarship policies, please visit our website at

BoStinSummerCamp.org

Scholarships are offered to families who:

- Register for camp online
- Provide a refundable deposit amount of \$50.00 with registration
- Assert financial need
- Complete and return this Scholarship form
- Provide a non-refundable \$20 processing fee with the Scholarship form

Our funding base is 100% local and we prioritize funding local families in need.

Parent/Guardian: _____

Work: _____

Parent/Guardian: _____

Work: _____

Residence Address: _____

City, State, Zip: _____

Email: _____

Best Contact Phone: _____

Best time to phone: _____

Camper's Name: _____

Age: _____ Birthdate: _____

Camper's Name: _____

Age: _____ Birthdate: _____

If necessary, list additional campers on the back

Please circle the Camp Weeks desired:

July 11-14 July 18-21 July 25-28 August 1-4

Registration Folio number: _____

Your family's Folio number is issued when online registration is completed. Please visit our website and register your children before completing and mailing this form.

What do these children hope to gain at camp?

If necessary, complete this explanation on the back

Family Income: \$ _____ Monthly Annual

Principal sources of income: Work

Unemployment Public Assistance

Retirement Child Support Other

Please check all that apply

How much financial assistance is needed: \$ _____

Please explain why financial assistance is needed:

If necessary, complete this explanation on the back

Special needs and circumstances:

Please know that this information is held in strictest confidence, is viewed only by our confidential Scholarship Committee, and is used only to allocate our scarce scholarship resources. Thank you for providing this information.

When this form is complete, please mail it with your non-refundable \$20 processing fee to

**Bolinas-Stinson Summer Camp
Box 1034
Bolinas, CA 94924**