



**THE BRANDYWINE AND RED CLAY VALLEY ASSOCIATIONS'**



**SUMMER CAMP SCHOLARSHIP APPLICATION**

***Please Note: A \$10.00 application fee per family is required. If your child/children are not selected for the program the fee will be refunded.***

Please answer all questions completely and be as specific as possible. Print (in ink only) or type. Complete a separate application for each participant. Scholarships are awarded on the basis of need and all answers will remain confidential. If you need assistance completing this form, please call the office at (610) 793-1090. **Application Deadline: April 30, 2012**

Today's Date: \_\_\_\_\_ Your Name: \_\_\_\_\_

Name of Child Participant: \_\_\_\_\_

Age of Child: \_\_\_\_\_ Birth Date of Child: \_\_\_\_\_

Has your child participated in BVA/RCVA camp programs before? \_\_\_\_\_

Has your child received a BVA/RCVA camp scholarship before? \_\_\_\_\_ Year \_\_\_\_\_

Mother's/Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's/Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

(Street)

(Apt.)

(City)

(State)

(Zip)

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_

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

Child's T-shirt size (circle one): Child: Small (6-8), Medium (10-12), Large (14-16)

Adult: Medium, Large, X-Large

Name and cost of program(s) child would like to attend:

Name of Program

Cost

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Cost: \_\_\_\_\_

The BVA and RCVA do not provide transportation for your child during this program. Can you provide, or arrange for, reliable transportation for your child to attend the summer program(s)? \_\_\_\_\_

Number of people in family: \_\_\_\_\_ Adults \_\_\_\_\_ Children (18 & under)

Combined annual income of family members (check one):

\_\_\_\_\_ Below \$15,000    \_\_\_\_\_ \$15,000-\$25,000    \_\_\_\_\_ \$25,000-\$35,000  
\_\_\_\_\_ \$35,000-\$45,000    \_\_\_\_\_ \$45,000-\$55,000    \_\_\_\_\_ Over \$55,000

Amount of assistance requested to send child to program(s): \_\_\_\_\_

Can you afford a partial payment? \_\_\_\_\_ If so, in what amount? \_\_\_\_\_

**Answers to the following questions are particularly important to the Scholarship Committee. Your application will not be considered unless all questions are answered thoroughly.**

Other activities your child will be involved in over this summer (Please be specific!):

Please describe why you would like to send your child to the program(s) at the Myrick Conservation Center.

Please explain why you feel you are in need of assistance for your child to attend the summer youth program(s). Please be as specific as possible and include any unusual circumstances that the scholarship committee should be aware of (e.g., several children in the family would like to attend camp; you have a child in college; low income, medical bills; etc.) Feel free to use additional paper if needed.

Are you applying for scholarships for more than one child? If yes, give name(s) of the other child(ren). \_\_\_\_\_

Your signature \_\_\_\_\_

You will be notified of scholarship decision within 4 weeks of receipt of this application.

***Return this form with summer camp registration form to:***

Summer Camp Scholarship Fund – Confidential  
Brandywine and Red Clay Valley Associations  
1760 Unionville-Wawaset Road  
West Chester, PA 19382

**APPLICATION DEADLINE: April 30, 2012**

Questions or Concerns?

Call (610) 793-1090, Fax (610) 793-2813 or E-Mail [water@bva-reva.org](mailto:water@bva-reva.org)

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**FOR OFFICE USE ONLY**

Review Date: \_\_\_\_\_

Scholarship Awarded: \_\_\_\_\_

To Be Paid by Applicant: \_\_\_\_\_

Total: \_\_\_\_\_

Approved By: \_\_\_\_\_