

**2016 SUMMER OUTDOOR LEARNING ADVENTURE
SCHOLARSHIP APPLICATION**

CHILD'S NAME: _____ Referred by: _____

ADDRESS: _____

PHONE: _____ email: _____

DATE OF BIRTH: _____ AGE: _____ SCHOOL: _____

FATHER'S/GUARDIAN'S NAME: _____ MOTHER'S/GUARDIAN'S NAME: _____

ADDRESS: _____ ADDRESS: _____

PHONE: _____ PHONE: _____

OCCUPATION: _____ OCCUPATION: _____

EMPLOYER: _____ EMPLOYER: _____

TOTAL NUMBER OF CHILDREN IN FAMILY: _____

Please attach a written statement describing why you feel your child qualifies to receive a scholarship. This camp seeks highly motivated, interested youngsters with a desire to learn about nature and wishing to spend a full day in the outdoors. We would like to know that your child indeed wants to attend a nature camp. Please also include a letter from your child expressing why they would like to attend camp. (Younger children can dictate letter to an adult).

Scholarships will be awarded based upon financial need and the child's desire to attend. If chosen, the parent/guardian must agree that every effort will be made to have the child participate all five days.

Please read the program brochure for the dates and specifics of the program. Please contact Lisa Hoyt, Center Director at (518) 658-2055 or dykenpond@fairpoint.net with any questions.

- MAIL :**
- 1. APPLICATION**
 - 2. PARENT'S WRITTEN STATEMENT**
 - 3. CHILD'S WRITTEN LETTER**

TO:
Friends of the Dyken Pond Center
475 Dyken Pond Road
Cropseyville, New York 12052

APPLICANTS WILL BE NOTIFIED BEFORE JUNE 30, 2016