



# 2018 Young at Art Creativity Camps



## Camp Scholarship

Email to [kim@steamboatcreates.org](mailto:kim@steamboatcreates.org)

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Preferred camp: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

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

Statement demonstrating financial need: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Statement of why you think the creative camp will benefit the child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please include tax return to show explanation of financial need.