



Young at Art Creativity Camps



Camp Scholarship

Email to 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.