

Summer Zoo Camp Scholarship Application Form 2019

| Child's Name: | | Age | 2018-2019 Grade: | | |
|---|--|--|---|--|--|
| Parent Name: | | Age: | Graue. | | |
| Address: | | | | _ | |
| | | Finalli | | _ | |
| Phone (Cell): | | Email: | | lanan hafana 2 V / N | |
| Brookfield Zoo Membership Number i (Please provide Membership Number i | | <u> </u> | r child attended Zoo C to qualify for scholarship) | amp before? Y / N | |
| *Choose the Zoo Camp level based on the grade your child is completing for the 2018-2019 school year. | Discovery (K & 1 st) | Explorer (2 nd & 3 rd) | Adventure (4 th & 5 th) | ZooLab (6 th , 7 th , & 8 th) | |
| Dates to attend Zoo Cam | np: | | | | |
| Please rate the following weeks in awarded for one week only of the | order of preference (1 = | · · · · · · · · · · · · · · · · · · · | · · | cholarships will be | |
| | June 10 – 14, 2019 | | 15 – 19, 2019 | | |
| | June 17 – 21, 2 | | 22 – 26, 2019 | | |
| | June 24 – 28, 2 | | 29 – August 2, 2019 | | |
| | July 8 – 12, 201 | | ust 5 – 9, 2019 | | |
| Check here if y | ou are already registere | ed for Zoo Camp. Your ca | mp registration may still | quality! | |
| | | | | | |
| Please initial the following | ng: | | | | |
| I understand that it is at camp fee they are able to the camp fee they are able to | to supportive this scholarship in oplication needs to be | years past received by April 30, | 2019 in order to be cor | nsidered | |
| Parent Signature | t Signature | | Date | | |
| For Office Use Only: | oved | Amount Grante | d | _Denied | |