

Summer Camp Minority Scholarship Application

Dear Parent/Guardian,

Thank you for your interest in attending a summer camp at the Alabama Museum of Natural History. This scholarship program offers financial assistance to Alabama families with children between the ages of 9-14 who cannot afford the full cost of camp. This scholarship will cover the full cost of camp for up to two children to attend Fossil Camp on June 3-7, 2024.

Please complete and return the attached form. All portions of the form must be completed to be considered for the scholarship.

Summer Camp Minority Scholarship Application

All information on this for	n must be complete ar	na accurate.	
Child(ren) Full Name:			
Date(s) of Birth:			
Grade Entering:			
Family Information			
Parent Full Name			
Address:			
City:	State:	Zip Code:	
Telephone (cell):	Email: _		
Demographic Information			
Child's Gender (circle one) Child's Race/Ethnicity (circ		er rican Indian/Alaskan Native	Asian
Black/African American	Hispanic/Latino Whi	te/Caucasian Other:	
Reason for Need			
Please explain why your ch	nild would benefit from	n this scholarship:	

Parent/Guardian Signature:D	ate