



SCHOLARSHIP APPLICATION FORM 2018 Drama Day Camps

Creede Repertory Theatre (CRT) is committed to ensuring our educational programs remain accessible for all students and by providing this scholarship application process it ensures Drama Day Camps remain accessible for all families in need. This process enables students to participate in a day camp that their family might otherwise not be able to afford. If you feel you need scholarship assistance, please carefully review and complete the following form to be considered for a scholarship.

Keep in mind that our scholarship funds are limited and vary in amount from year to year. Since our scholarships work on a first come first served basis, we strongly encourage families to apply sooner rather than later. Scholarships may cover a portion or the full cost of a day camp tuition.

*NOTE: All information on this application will remain strictly confidential.

Instructions:

1. If you need to apply for more than one scholarship, please fill out a form for each participant.
2. Please submit the completed application with a completed registration form by **Monday, July 2nd** to Johamy Morales, Education Director, johamy@creederep.com or via mail to: *Attn: Education Department, P.O. Box 269, Creede, CO 81130*
3. Parents and guardians will be notified of scholarship decisions via email a week after the scholarship application and registration form have been received.

Please select the day camp you would like to apply this scholarship to:

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- Improv Studio** • ages 8-12 • 6/19 - 6/22 • 10am - 3pm • \$225
 - Action Storytime Session 1** • ages 3.5-5 • **7/8** • 10:30am-12:30pm • \$45
 - Action Storytime Session 2** • ages 3.5-5 • **7/18** • 10:30am-12:30pm • \$45
 - Witches and Monkeys** • ages 5-7 • 7/19 – 7/21 • 10am-3pm • \$195
 - Sketch Your Comedy** • ages 12+ • 7/24 – 7/27 • 10am-3pm • \$225
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Participant's Full Name: _____

Age at start of camp: _____ Grade level in fall 2018: _____

1) Parent/Guardian Name: _____

Relationship to Participant: _____

Address: _____

Home phone: _____

Cell phone: _____

Email address: _____

Currently Employed? (check one) YES NO
(check one) FULL TIME PART TIME

2) Parent/Guardian Name: _____

Relationship to Participant: _____

Address: _____

Home phone: _____

Cell phone: _____

Email address: _____

Currently Employed? (check one) YES NO
(check one) FULL TIME PART TIME

Annual Household income *select one*:

- \$0.00 - \$19,999
- \$20,000 - \$29,999
- \$30,000 - \$39,999
- \$40,000 - \$49,999
- \$50,000 - \$59,999
- \$60,000 - \$69,999
- \$70,000 +

Total number living in household:

Has the student participated in a CRT Day Camp before? (check one) YES NO

Tell us about the participant:

How will this CRT scholarship benefit the participant?

Is there anything else you would like for CRT to know?

What is a feasible day camp tuition for your family? _____

I have completed all applicable information requested accurately and to the best of my ability. I certify that the cost of this program would otherwise prevent me from enrolling a participant in a camp. I understand that completion of this application does not automatically qualify me for assistance. Requests are subject to review based on need and availability of scholarship funds.

Signature _____ Date _____

Return form to Johamy Morales, Education Director, johamy@creederep.com
OR via mail to Attn: Education Department, P.O. Box 269, Creede, CO 81130