

### Alpha Omega Summer Camp Scholarship Application 2011

Name					
Address					
Email	Gender(circle one)	Male	Female	Grade	D.O.B.
Parent/Guardian Name	rent/Guardian Name Relationship to child			ld	
Home Address (if different from	above)				
Phone	Email				
Medical issues and/or specia	Il considerations?(eg. injuries,	diet, allerç	gies, asthma a	ınd medicatioı	n) ————————————————————————————————————
Emergency Contact					
Contact Name			Re	lationship 1	to camper
Cell Phone	Email				
Participant Availability					
Which program(s) are you int	erested in:				
Best Camp Ever	Clown Academy	Camp	Rising Sta	r	
Super Hip Hop	Dance N More				
Which dates are you intereston How did you hear about this					
If you were recommended, v	who referred you?				
If full scholarships are not av	/ailable, are you interested i	n a part	ial scholars	ship?	
if so, how much can you affor	ord to pay?	_			
Parent/Guardian Signature				Date	



# Alpha Omega Summer Camp Scholarship Application Letter of Recommendation

Please give this part of the form to the teacher, mentor, counselor(no relatives) you have asked for a letter of recommendation.

Name of Applicant (pleas	e print)	
Name of Recommender (	please print)	
Relationship to Applicant		
Phone	Email	
	er and unique abilities of the applicant. In par and benefit from the Alpha Omega Scholarsh e program.	
Please write your letter on a the application.	separate sheet of paper, return this page an	nd letter of support to applicant to include in
Signature of Recommer	nder	Date



### Alpha Omega Summer Camp

## Scholarship Application Questionnaire and Essay

(additional paper may be used)

What is your experience with dance, art, or sports?
Why are they important you?
What do you know about healthy lifestyles, discipline and teamwork?
What does your participation in this camp mean to you?
Describe a challenge you overcame. What was it, and how did you persevere?
Tell me a little bit about yourself and why you need/deserve to be in this program. (300-350 words)