



Norman Bird Sanctuary

Camp Scholarship Form 2010

The Norman Bird Sanctuary strives to serve everyone in our community, regardless of financial circumstances. A limited number of partial scholarships are available based on need.

Scholarships are given out on a first come / first served basis until the allocated funds are depleted. An award is based upon information provided by the parents, schools, and/or social service agencies, and is solely at the discretion of the Norman Bird Sanctuary. All information will be kept confidential.

Please complete the following information in full. Complete one form for each child that wishes to attend camp.

Parent/Guardian's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Preferred Method of Contact _____

Child's Information

Name _____ Male Female

Birthdate: ____/____/____ Age: _____

School: _____ Grade Entering in the Fall _____

Camp Desired (Please check or rank preference based upon the appropriate grade level.)

<input type="checkbox"/> Fledglings (Ages 3-5)	<input type="checkbox"/> Island Adventures (Entering Grades 6-8)
<input type="checkbox"/> Nature Day Camp (Entering Grades K-4)	<input type="checkbox"/> Summer Challenge (Entering Grades 6-8)
<input type="checkbox"/> Explorers (Entering Grades 4-6)	<input type="checkbox"/> Ecology Adventures (Entering Grades 8-12)
<input type="checkbox"/> Field Explorers (Entering Grades 5-7)	

Desired Sessions (Please rank preference or indicate if multiple sessions are desired. For session information, please refer to our 2010 Summer Camp Brochure. If the week(s) chosen are full, we will contact you to discuss other options.)

<input type="checkbox"/> Session 1 (June 28-July 2)	<input type="checkbox"/> Session 5 (July 26-30)
<input type="checkbox"/> Session 2 (July 6-9, 4 days)	<input type="checkbox"/> Session 6 (August 2-6)
<input type="checkbox"/> Session 3 (July 12-16)	<input type="checkbox"/> Session 7 (August 9-13)
<input type="checkbox"/> Session 4 (July 19-23)	<input type="checkbox"/> Session 8 (August 16-20)

Family Income:

Total # of people in family (adults & children): _____

Taxable Yearly Income for Family: \$_____

To verify income, please include one of the following:

1. Copy of 2009 Federal tax form.
2. One month of pay stubs from 2009.
3. Copy of Benefits Determination letter (Welfare, AFDC, SSI)

Partial Scholarship Request (check the amount you are able to pay):

_____ ¾ total camp cost _____ ½ total camp cost _____ ¼ total camp cost

_____ Other Amount (Please indicate how much the parent/guardian can reasonably contribute towards the cost of the camp session.)

Please provide brief responses to the following. Attach additional pages as necessary.

Why does your child wish to attend NBS summer camp? How do you think he/she would benefit from the experience? _____

Please list any special circumstances that are relevant in awarding financial aid: _____

To the best of my knowledge, the information provided above is correct.

Signature of Parent/Guardian _____

Date: _____

Please submit applications to:

**Norman Bird Sanctuary
Attn: Camp Scholarship
583 Third Beach Rd.
Middletown, RI 02842**

If you have any questions, please contact us at (401) 846-2577.

www.NormanBirdSanctuary.org