# Oakland Yard Happy Camper Scholarship Application

Please fill out this form completely and submit it with the required items by email or mail to the address below. Application must be received by 5/10/19 to be considered.

Happy Camper Scholarship % Oakland Yard Athletics 5328 Highland Road Waterford, MI 48327

campdirector@oaklandyard.com 248-673-0100

### Guidelines

- 1. Applicants will be evaluated without regard to race, religion, natural origin, sex or physical ability.
- 2. Funding is limited and scholarships are not guaranteed for all applicants.
- 3. Staff of Oakland Yard and their children are not eligible for scholarship assistance.
- 4. Scholarships may not be awarded to the same recipient two years in a row.
- 5. Incomplete applications will not be reviewed.
- 6. Scholarships will include breakfast, morning camp, lunch, and Camp FreeStyle in the afternoon.

## Requirements

- 1. Complete and submit the application with a <u>letter from the child outlining their interest</u> in attending camp at the Oakland Yard.
- 2. Scholarship recipients must agree to complete a follow-up report after the camp is over.

# Name of Child: \_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_ Parent/Guardian Name(s) \_\_\_\_\_\_\_ Mailing Address: \_\_\_\_\_\_\_ City: \_\_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_\_ Please list the name and dates of the specific Oakland Yard camp your child is interested in:

## **Financial Information**

Eligibility for scholarships is based on the following criteria and conditions, including household size\*and income standards. If an applicant does not fall within these criteria but can prove other special circumstances, the scholarship committee will review and may grant a scholarship.

\*Household includes all people (adults and children) living in the household, related or not (grandparents, other relatives, friends, etc.)

Annual Income

Total Household

2	\$24,360
3	\$30,630
4	\$36,900
5	\$43,170
6	\$49,440
7	\$55,710
8	\$61,320

Size*				
Household Size:		Annual Income:		
Are there extenuating circun	nstances that contrib	ute to the need for financial assistance at this time?		
Please explain.				
Additional Questions				
Has your child ever attended	d camp previously (if	yes, please include the details)?		
What do you hope your child	I will gain from this e	xperience?		

By signing this application, I commit to providing transportation for my child to attend a one-week day camp at the Oakland Yard. I acknowledge that they must arrive by 9 AM and be picked up by 5 PM. I have attached a letter from my child outlining their interest in the camp. I also guarantee that my child

will complete the Post-Summer Camp Report (attached I	here) and	return it to	Oakland	Yard .	Athletics
within 30 days of the camp's completion.					

Signature:	Date:

# **Post-Camp Report**

Please fill out this form completely and submit it with the required items by email or mail to the address below within 30 days of the completion of the Oakland Yard camp.

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# campdirector@oaklandyard.com 248-673-0100

Name:		Date of Birth:	
Parent/Guardian Name(s):			
Mailing Address:			
City:	State:	ZIP:	
Phone:	Email:		
Which summer camp did you attend?			
When did you attend summer camp?			
What did you learn at summer camp?			
What was your favorite part of summer	camp?		
	-		

o you have any pictures you	u would be willing to sh	nare with us? If so, pl	ease attach them to t	his report