## FAMILY SCHOLARSHIP APPLICATION

Derent Name(a)			2
	Date		
Address			
City			Zip
Email:			
Children who will be staying with parents a	Ind their age:		
Children who will be staying with counselo	rs and their age:		
(Children who will be with counse	lors are eligible to apply for	r camper	scholarships.)
Scholarships will be awa	arded as long as func	ls are a	vailable.
This fully completed form plus a \$100 your scholarship reque	) deposit (\$50 non-refund est and reserve space for	,	• •
Transportation to camp is not covered by	a NWCCD scholarship and	l is the ca	mper's responsibility.
If a scholarship is awarded	, the family must provide th	ne remain	ing fee.
There are n	o full NWCCD scholarships	S.	
<u>A NWCCD Family Sch</u> Children staying with counselors are There is a separate camper scholarship fo		ate camp	er scholarships.
How did you find out about NWCCD Cam	p?		
Have you been to NWCCD before?	yes no How	many yea	irs?
Include this form with your camper registra Mail to: NWCCD P.O. Box 1585 Brush Prairie, V	-	postmark	ed by June 1st.
Our email address: NWCCD2011@yaho Our website: gmdeaf.org	o.com		7/29/10