



MAHOMET SEYMOUR MUSIC BOOSTERS

Application for Summer Camp Scholarship

Contact Information

Student's Name: _____ Parent's Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Camp Information

Camp Name and Location: _____

Camp Dates: _____ Camp Cost: _____

Program Type: Instrumental Vocal

Supporting Documentation: Please attach proof of payment and proof of attendance, such as a program from a camp performance. Originals are not required; copies will be sufficient.

Skills Learned

Briefly state the specific skill sets and/or activities taught during summer camp, including how you will use these skills.

Applicant Signature: _____

Submit Form by September 1. Please return this form and supporting documentation by September 1 to:

Jennifer Bartlett, 1818 E. West Lake Dr., Mahomet, IL 61853

jbartlett@msmusicboosters.org