



**Discover Friends, Discover Talents,
Discover Nature, Discover Yourself**

The Renaissance Scholarship Application for Camp Tracy Summer 2019

APPLICATION DEADLINE: Thursday, May 16 2019 for Summer Programs

The Camp Tracy Alumni Association is pleased to announce The Renaissance Scholarships in recognition of its founders George Keller, Richard Hawkes and Lester Jolovitz. The future of Camp Tracy is you, the campers. We want to make it possible for you to be part of that future by offering Scholarships to those who otherwise could not afford to attend Camp Tracy. Scholarships are awarded based on the application and your interest in attending Camp Tracy.

To Apply:

Fill out the attached application

Attach

- A short message from the camper explaining why he or she wants to attend Camp Tracy (or, as age appropriate, a picture and limited writing).
- If the camper has previously attended Camp Tracy, please include a few of his or her memories.

Send your application to: CampTracyAlumni@gmail.com or

Benjamin Barlock
267 Concord St West
Portland, ME 04103

Please be as comprehensive as possible in the information you provide to us. You will be notified of our decision by June 3rd, 2019.

If you have any questions, please contact CampTracyAlumni@gmail.com or call the Alford Youth Center at (207)873-0684 and ask for Kurt Mathies or Abbie Charrier.

Child's Name _____
Age (As of May 2019) _____ DOB _____ Grade (Entering Fall 2019) _____
Male _____ Female _____ Returning camper Yes ___ No ___
Parent/Guardian: _____ Relationship to child: _____
Address: _____
City/State: _____ Zip: _____
Email Address: _____ Phone: home
() _____ cell () _____
Child's School: _____ City/State: _____

We are requesting (please choose one):

- ☐ Partial Scholarship of \$ _____
☐ Full Scholarship

Camp option:

- ☐ Day Camp

This child has a sibling(s) who is also applying for a camp scholarship.

Name(s) _____

Were you awarded a camp scholarship in the past? Yes ___ No ___ If yes, give year(s): _____

I certify that the above information is correct.

Parent/Guardian Signature _____ Date _____ Relationship to child _____

We would like permission to share excerpts from your letter and your child's letter with donors.

- ☐ Yes, you may share these materials.
☐ No, please use these materials only for the application process.

