

Application Form for Bank of America Scholarship 2009 Beidler Forest Summer Day Camp

Sponsoring Organization, certifying Qualification Requirements: _____

Organization contact person: _____ Daytime phone: _____ E-mail: _____

Address: _____

You must call ahead of time and make a reservation before sending this form!

(843) 462-2150

Session #1: June 22-26 Session #2: July 13-17 Session #3: July 20-24

Child's Name _____ Age _____ Parent/Guardian Name _____

Address _____ Code Word *(see below)* _____

Daytime Phone _____ Emergency Contact Person _____ Emergency Phone _____

Certified applicants must meet one or more requirements:

Qualify for Medicaid; qualify for free or reduced lunch; or reside in a household whose income is 30-50% of Charleston MSA median income of \$46,421.

YOU MUST CALL FOR RESERVATIONS FIRST!

Please send a list of all people allowed to pick up your child at the end of each day. Your child will not be allowed to leave with anyone not on the list. During camp, you may add a person by phone with the use of your code word listed above. **Do not share your code word with anyone else.**

Please **mail this form** to: Beidler Forest Summer Camp, 336 Sanctuary Road, Harleyville, SC 29448.
or **FAX** to: Mark Musselman (843) 462-2713

http://sc.audubon.org/Centers_FBF_Educators_SummerCamp.html