

2020 Summer Camp Scholarship Application



Thank you for applying for a scholarship to participate in a week of summer camp with the Great Basin Naturalists *at Galena*. This application will allow the selection committee to become better acquainted with each applicant, and provide the information necessary to make an informed decision. Please be sure to complete the entire application, as incomplete applications will not be accepted. Applications must be received by the dates indicated below. Recipients will be notified not later than three days after the submission deadline. Questions about the application? Please call (775) 849-4948 or visitorcenter@GBInstitute.org.

Campers ages 8-12 for Exploration Camp and 13-17 for Field Biology for Teens Camp.

APPLICANT INFORMATION

Name of Child _____
 Phone Number _____ Age _____ Grade _____
 Birthdate _____ School _____
 Will you need help with transportation? _____

PARENT/GUARDIAN INFORMATION

Name of Parent or Guardian _____ E-mail Address _____
 Address _____
 Phone numbers _____ Date of Application _____
 Gross Annual Household Income (before taxes) _____ Total individuals in household _____
 _____ Where did you hear about us? _____
 Parent/Guardian Signature _____

CAMP SESSIONS

DAY CAMPS	DATES	RESIDENTIAL CAMPS	DATES
Wilderness Adventure 1	June 8-12	Water World Exploration	July 13-17
Wilderness Adventure 2	June 15-19	Power of Plants	July 20-24
Field Biology for Teens	June 15-19	Field Biology for Teens	July 20-24
We Mean Green	June 22-26	A Bug's Life	July 27-31
Animal Adaptations	July 6-10	Rock Jocks	August 3-7
Field Biology for Teens	July 6-10		

**Scholarships are awarded by week, with up to three weeks potentially available for each child.

Please indicate your top (three) themes that you would like to be considered for scholarship (1 - first choice):

1. _____ 2. _____ 3. _____

Please be aware that if your first choice falls at a later date, you **MUST** have your application in by the earliest deadline for the weeks indicated in order to be considered for all desired weeks.

2020 Summer Camp Scholarship Recommendation Form



TO BE COMPLETED BY A TEACHER OR COUNSELOR

Reference Name _____

Phone Number _____ Email _____

Name of Applicant _____

Relationship to Applicant _____

Please comment on the specific ways you believe this applicant will benefit from having the opportunity to take part in spring or summer camp at Great Basin Naturalists at Galena Exploration Camp.

Signature _____

Date _____

E-mail completed application to lazzarello@gbinstitute.org, or **Mail** completed application to:
Galena Creek Visitor Center
Attn: Laura Azzarello
16750 Mount Rose Highway, Suite 101 • Reno, NV • 89511

Please call 775-849-4948 or e-mail visitorcenter@gbinstitute.org for more information