

OTTAWA COUNTY
4-H CAMP SCHOLARSHIP APPLICATION
Due to the Extension Office
May 1st

Please check which camp you are applying for:

_____ Junior Camp - June 17-21 (youth ages 8-13)

4-H Member Name _____

Parent/Guardian Name _____ Phone _____

4-H Club _____ E-Mail _____

Address _____ City _____ Zip _____

Age as of January 1st (current year) _____ Grade in School _____

Total number of years in 4-H (including Cloverbud years) _____

Number of years I have attended camp _____

Number of children in my family attending camp (including myself) _____

List activities in which you have participated in as a 4-H members such as: local club work, demonstrations, style revue, judgments, community service, Ottawa County Fair, State Fair, Ice Cream Stand, others.....

Why do you want to go to 4-H Camp?

Please answer the following statement:

"What 4-H means to me" _____

Statement by parent/guardian of why financial assistance is needed in order for the child to go to 4-H camp, please be specific. _____

Parent/Guardian: Are there special reasons why you feel the experience of going to camp would be beneficial to this child? _____

Applicant's Signature

Parent Signature