



Stone Zoo ZooCamp Scholarship Application 2024

- Completed form (1 per child) must be **received by March 16, 2024**
- The completed form can be scanned & sent in via email OR printed & mailed.
 - Stone Zoo Applications:
 - Email: SZcamp@zoonewengland.org
 - Address:
Stone Zoo Attn: Education Department
149 Pond Street
Stoneham, MA 02180

Camper's name: _____ Date of birth: ____/____/____

Grade level completed by June 2023: _____ Has your child attended ZooCamp before? _____

Are you a Zoo Member? _____ Membership Number: _____ Exp. Date ____/____/____

Which week of camp would you like your camper to attend? *Please mark 1st, 2nd, and 3rd choices (1 being top choice).*

Sessions 1-3: 6-7 year olds / Sessions 4-6: 8-10 year olds / Session 7-9: 11-13 year olds / Session 10: 4-5 year olds.

__ Session 1 (June 17-21) (no camp 6/19) __ Session 2 (June 24-28) __ Session 3 (July 1-5) (no camp 7/4)

__ Session 4 (July 8-12) __ Session 5 (July 15-19) __ Session 6 (July 22-26)

__ Session 7 (July 29-August 2) __ Session 8 (August 5-9) __ Session 9 (August 12-16)

__ Session 10 (August 19-23)

Applicants relationship to camper: _____

Applicant's Name: _____ Applicant's cell phone number: _____

Address: _____ City: _____ Zip: _____

Email address: _____ Additional email or phone: _____

Camper's address (if different from applicant): _____ City: _____

Zip: _____

Is your family currently enrolled in any of the following programs? (Please check all that apply)

EBT

WIC Nutrition Program

Foster or Kinship Care

Other: _____

How would the camper benefit from the ZooCamp experience vs. another program type or activity?

Is there anything else you'd like us to know?

Can you commit to ensuring that the camper will attend their camp session? *Please check:* YES NO

Once registered, if the camper is not able to attend their session, please let us know ASAP so we can offer this opportunity to another camper.

I certify that all of the information on this application is true & complete.

Applicant Name: _____

Applicant Signature: _____ Date: ____/____/____

ZOO OFFICE USE ONLY

Date Approved: ____/____/____ Amount approved: \$_____ Approved by: _____