



# Friends of Boyd Hill Camp Scholarship Nomination Form

To be eligible, the nominee must meet all qualifying criteria and all forms must be filled out completely and returned to the scholarship committee no later than March 30, 2018.

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Entering Grade: \_\_\_\_\_ School: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (Zip)

Phone Number: \_\_\_\_\_

Nominator's Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I hereby certify that this child qualifies for the free or reduced lunch program.

Nominator's Signature \_\_\_\_\_



**Nominator Comments:**

Please tell us why this student should be awarded a scholarship to Boyd Hill Nature Preserve's Summer Camp.

**Student Comments:**

*Please tell us why you would like to attend Boyd Hill Nature Preserve's Summer Camps.*