



Lyric's AWESOME! Summer Camp Scholarship Application

PLEASE FILL OUT THIS FORM COMPLETELY AND SUBMIT WITH THE REQUIRED ITEMS TO:
The Lyric Theatre, Attn: Lauren Epsenhart, 59 SW Flagler Ave, Stuart, FL 34994
education@LyricTheatre.com Fax: 772-287-8693 772-220-1942, ext 205

DATE OF APPLICATION: _____

I AM REQUESTING AID FOR: Session 1 Session 2

SCHOLARSHIP APPLICATION DEADLINE: MAY 15th

SUMMER CAMP SCHOLARSHIP GUIDELINES:

- Applicants are evaluated without regard to race, religion, natural origin, sex or physical ability
- Funding is limited and scholarships are not guaranteed to all applicants
- Scholarships are awarded on a first-come, first-served basis
- Staff of The Lyric Theatre and their children are not eligible for scholarship assistance.
- Incomplete applications will not be reviewed
- Scholarships will be awarded based on financial need and availability

SUMMER CAMP SCHOLARSHIP RECIPIENT REQUIREMENTS:

- Submit completed application
- Submit most recent tax return (required for all applicants)

PLEASE FILL OUT ONE FORM PER CHILD

Name of Child: _____ Birth Date: _____/_____/_____

Mailing Address: _____

City: _____

State: _____ Zip code: _____ Phone: _____

Family Email: _____

Rising Grade: _____ School: _____

Are any of your family members currently members of The Lyric Theatre? YES NO

If so, who? _____

TUITION PER SESSION IS \$395.00 + \$25 REG. FEE. A 10% DISCOUNT IS APPLIED FOR SIBLINGS.

Amount of scholarship you are requesting at this time? _____

Are you able to pay any portion of the tuition? If so, how much? _____

How many children currently live in the household? _____ Please list their ages: _____

REQUIRED FAMILY INFORMATION:

Father's Name: _____

Address (if different): _____

Place of Employment: _____

Mother's Name: _____

Address (if different): _____

Place of Employment: _____

Name of Legal Guardian (if not living with mother/father): _____

| FINANCIAL INFORMATION | Total Household Size* | Yearly Income | Monthly Income |
|---|-----------------------|---------------|----------------|
| Eligibility for need-based scholarships is based on the following criteria as determined by the Federal Register Income Eligibility Guidelines and conditions, including household size* and income standards. If an applicant does not fall within these criteria but can prove other special circumstances, the scholarship committee will review and may grant a scholarship. A child's performance in school and involvement in community arts organization will be taken into consideration as well. *Household includes all people (adults and children) living in the household, related or not (grandparents, other relatives, friends, etc.). | 2 | \$29,637 | \$2,470 |
| | 3 | \$37,296 | \$3,108 |
| | 4 | \$44,955 | \$3,747 |
| | 5 | \$52,614 | \$4,385 |
| | 6 | \$60,273 | \$5,023 |
| | 7 | \$67,951 | \$5,663 |
| | 8 | \$75,647 | \$6,304 |

Please indicate your total annual household income from all sources (including wages, interest income, investments, alimony, child support, social security, public assistance):

- Below \$10,000 \$10,001-\$15,000 \$15,001- \$20,000 \$20,001-\$25,000
- \$25,001-\$30,000 \$30,001-\$35,000 \$35,001-\$40,000 \$40,001-\$45,000
- \$45,001-\$50,000 \$50,001 - \$55,000 \$55,001-\$60,000 \$65,000+

Are there any extenuating circumstances, permanent or temporary, that make financial assistance necessary at this time? _____

Are other family members currently applying for assistance? Yes No

Has anyone in your family previously received financial assistance through our scholarship fund? Yes No

If yes, when? _____ How much was received? \$ _____

Will you child have reliable transportation to and from camp each day? _____

PLEASE NOTE: Camp hours are from 9:00am – 4:00pm. Campers must be dropped off and picked up promptly at these times. Guardian must also provide camper with a brown bag lunch and 2 snacks each day.



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772-220-1942, ext 205

Post-Summer Camp Report
(Due 30 days after completion of Summer Camp)

Child: _____ Birth Date: ____/____/____

Mailing Address: _____

City: _____ State: ____ ZIP: _____ Phone: _____

Family Email: _____ Rising Grade: ____

School: _____

Scholarship Type: Need Merit

When did you attend Summer Camp? (please list dates): _____

What did you learn at the Lyric AWESOME Summer Camp?

What was the most AWESOME part of Summer Camp?

What was the least AWESOME part of Summer Camp?

What is something you learned at camp that you will use at home and school in your everyday life?
