

Maine Audubon Camps Financial Aid Application



Maine Audubon offers need-based, partial scholarships for our school-year and summer camps programs. We reserve spots for scholarship recipients and consider financial aid applications on a rolling basis. Please see our website for more details about priority application deadlines and camp schedules: www.maineaudubon.org/camps

To apply, please fill out this form and submit a copy to scholarships@maineaudubon.org or Attn: Camp Scholarships, Maine Audubon, 20 Gilsland Farm Rd, Falmouth, ME 04105

Completing this form does not register your child in a program. You must speak with the scholarship administrator to be registered.

Participant Information

Name

Date of Birth

Grade

Parent/Guardian Information

Name

Address

Phone

Email

Are you a Maine Audubon member?

Yes

No

Parent/Guardian Information

Name

Address

Phone

Email

Are you a Maine Audubon member?

Yes

No

Program Information

Please list, in order of preference, the camp session(s) for which you require financial assistance. We are able to provide assistance for a maximum of 3 weeks per child each calendar year.

- 1.
- 2.
- 3.

Financial Information

We determine need based on a combination of factors: income, family size, and other circumstances. We ask that scholarship recipients contribute part of the cost of camp if they are able. If a family contribution is outside of your current means, we still encourage you to apply.

Number of children in your family that you claim as dependents

Taxable household income from last year's tax form

This year's projected taxable income for your household

Do you receive any state or federal assistance benefits? If so, please list.

Have you previously received financial aid to attend a Maine Audubon program?

Yes No

If yes, what year?

How much, if any, could you contribute to the cost of a camp session, per weeklong session?
(Typically \$50-75/session)

Please use the space below or a separate document to comment briefly on any expenses or circumstances you feel might qualify you for financial aid that are not represented here.

I/We, the undersigned, affirm that the above information is true.

Parent/guardian signature

Date

Parent/guardian signature

Date