

## Phoenix Firecamp 2017

## **Scholarship Application**

Please fill out this application in its entirety. A scholarship is awarded based on need, and is valid for 2017 Phoenix Firecamp only. This application should be returned with your application for camp by May 1, 2017.

Name:		_ M/F:		
Address:				
Phone:	Email:			
Are you employed?	Is/are 1 o	r both of your parents employed?		
Household Annual Income				
List all members currently living ir	n your household.			
Full Name	Age	Age Relationship to you		

Do you or family currently receiv	ve SNAP Benefits?	

Why do you feel you need this scholarship?

If you receive this scholarship, are you able	to attend	Phoenix	Firecamp	July	17-22,	2016,	and p	orovide
your own transportation to and from Utica?								

By signing below, you acknowledge all information listed above is complete and correct.

(Signature of Parent/Guardian or Applicant if 18)

(Date)

Submit scholarship application and camp application **BY MAY 1, 2017** to: Phoenix Firecamp, 3842 US 20, Nassau, NY 12123