

APPLICATION FOR SUMMER CAMP ASSISTANCE

Palos Village Players

We are happy that you have considered making application to the Palos Village Players for financial assistance to be used toward a summer camp, class, or a similar kind of learning experience. In addition to completing the application which follows, if chosen you will be asked to attend the September meeting of the Palos Village Players, which occurs in the evening on the third Monday of the month (September 17, 2012) at Hackney's Restaurant in Palos Park. You will be asked to perform something you have learned in your theater/speech experiences or to explain how the program you attended has helped you expand your learning in the areas of speech and/or theater. If, for any reason, you are unable to attend the September meeting, you must be willing to attend another meeting of the Players to be arranged by mutual consent.

Student Name _____ Date _____

School Name _____ Present year in School _____

Home Address _____

City _____ Zip Code _____ e-mail _____

Home /cell Phone(s): _____

Camp/Program to be attended _____

Institution/Organization Providing Instruction _____

Person/Address where check will be mailed _____

Using the back of this application, please indicate why you are a good candidate for financial assistance at this time. Make sure your handwriting is legible and your ideas represent sound thinking. **Your application will not be considered if this portion is incomplete.**

RETURN THE COMPLETED APPLICATION TO THE PERSON WHO GAVE IT TO YOU AND ASK THAT PERSON TO SIGN IT HERE: _____