

The ARROWHEAD ARTS ASSOCIATION  
Arrowbear Music Camp Scholarship Application

\*\*\* PLEASE NOTE: Registration for Arrowbear Music Camp must be submitted directly to the Camp,  
SEPARATELY from this application \*\*\*

Student's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

Grade next year \_\_\_ School: CHE \_\_\_ LAE \_\_\_ VOE \_\_\_ MPH \_\_\_ RHS \_\_\_ OTHER \_\_\_\_\_

Instrument \_\_\_\_\_

Name of Arrowbear Session and Date \_\_\_\_\_

Attended Arrowbear Music Camp before? No \_\_\_ Yes \_\_\_\_\_

If 'Yes,' what date(s) and session(s) \_\_\_\_\_

Will you be getting a scholarship from Arrowbear Music Camp or another donor?

No \_\_\_ Yes \_\_\_ If yes, what organization? \_\_\_\_\_

Many students attend Arrowbear Music Camp by the generosity of private donors to Arrowhead Arts Association. After your student's session has ended, may we ask that he/she write a short "Thank You" note to the donor (many have asked to remain anonymous) telling the donor of their experiences at Camp?

\*\*\*Optional - Music Teacher's Recommendation and Comments:

\_\_\_\_\_  
Music Teacher's Signature \_\_\_\_\_

You will be notified by telephone or email of the outcome of your application.

Please submit this completed Arrowhead Arts Scholarship application by April 1 to:

Carol Labarrere at: carol.labarrere@gmail.com