



**Scholarship Application for the 2019 Lutheran Music Summer Camp**

Applicant's Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Grade entering, Fall 2018: \_\_\_\_\_

School: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_

Parent email(s): \_\_\_\_\_

Parent phone(s): \_\_\_\_\_

Name/location of summer camp: \_\_\_\_\_

Instrument(s) studying: \_\_\_\_\_

Number of years studying: \_\_\_\_\_

Name of instructor(s): \_\_\_\_\_

Are you a member of St. John's Lutheran Church? \_\_\_\_\_

Why do you wish to attend a Lutheran summer music camp?

What do you hope to gain from your summer camp experience?

Do you have future career goals in music?

Signature of Applicant \_\_\_\_\_

Signature of Parent \_\_\_\_\_