



SCHOLARSHIP APPLICATION FORM

WonderLab values the participation of all children in camp, regardless of financial circumstance. Full and partial scholarships are available as funding permits. Awards are made on the basis of need. Typically, scholarships are available for up to two camps per child. WonderLab reserves the right to limit the number of scholarships awarded to the same family, particularly if the demand for scholarships is high.

**THIS FORM MUST BE SUBMITTED WITH THE CAMP REGISTRATION FORM
PLEASE USE ONE FORM PER CHILD AND PRINT CLEARLY.**

Child's Name: _____ Number of people in household: _____

Parent/Guardian's Name: _____

• Does the child qualify for free or reduced cost lunch program at school? Yes No

• Is the child enrolled in the Hoosier Healthwise Medicaid Program? Yes No

INCOME

Please list the total monthly income received by ALL household members.

Type of Income: _____ Monthly Amount Received: _____

Type of Income: _____ Monthly Amount Received: _____

OTHER INFORMATION

Other information, if any, to support application: _____

I, the undersigned, understand all information given will be kept confidential and that the information requested on the application is accurate and true to the best of my knowledge.

X
Signature of Parent/Guardian

_____ Date