



# PERSEVERANCE THEATRE

— Alaskan Regional Theatre —

## CAMP SCHOLARSHIP APPLICATION

We applaud your interest in participating in a camp at Perseverance Theatre! We are very happy to provide financial assistance to students and their families. Please fill out the information below and submit this form to our Education Associate, **Paul Ríos**, at [paulr@ptalaska.org](mailto:paulr@ptalaska.org). You will receive a response in a timely manner upon submission of this form. We will do our best to accommodate you and your student(s) to provide equal opportunity and access to our educational programs. Thank you!

PARTICIPANT'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

GENDER \_\_\_\_\_ SCHOOL \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_

### CONTACT INFORMATION

PARENT/GUARDIAN 1 FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

PARENT/GUARDIAN 2 FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_

### HOUSEHOLD INFORMATION

APPROX. ANNUAL HOUSEHOLD INCOME \_\_\_\_\_ NUMBER OF PEOPLE IN HOUSEHOLD \_\_\_\_\_

### SCHOLARSHIP INFORMATION

*Please indicate the scholarship request you are applying for:*

\_\_\_\_\_ **50% Scholarship** (family pays 50% tuition cost) \_\_\_\_\_ **100% Scholarship** (family pays 0% of tuition cost)

*My signature below verifies that this form is filled out accurately and truthfully to the best of my knowledge. I understand that scholarships are awarded based on program availability as well as financial need. I attest that I am submitting a scholarship application for a student that Perseverance Theatre can accommodate in its educational programs.*

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_