

## CBMC Summer Camp Scholarship Application **DEADLINE**:

Application and youtube video link must be RECEIVED by March 30, 2023 by 5 pm Upload video to youtube & email link to cbmcsonata@gmail.com or mail to below address\*\*

Applicant's Name:		Date of B	irth:	Age:
Street Address:		City:		Zip:
E-mail:	Home Phone	e: ( )	Cell: (	)
Middle/High School attended:				
Instrument:	Current Grad	de in School:		
Teacher:	Total # years of lessons: # years with present teacher:			
Teacher email:	Work Phone (	)	Cell:	
Teacher's Signature:		ast 6 months:		
acknowledging that applicant h	as been their student for at le	ast 6 months:		
Parent's or Guardian's Name:		email:		
Home Phone:	Cel	l:		
1				
2.				
List music activities, performan	nces, awards received througl	າ music organizatiດ	ons (ie: Festiva	ıl, Guild, Contests)



## **CBMC Summer Camp Scholarship Application (page 2 of 2)**

List music activities and awards received at your school:	
List music activities and awards received in the community or your o	:hurch:
List your plans for the future:	
What Music Comp do you play to ottomb	
What Music Camp do you plan to attend:	
What is the Cost of the Camp Registration:	

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- We prefer that you Email this application and your Youtube Video link to cbmcsonata@gmail.com and in your email's subject line, type: Summer Camp Scholarship App from "your first and last name"
- Or mail this form to: Bridget Weber, 4239 Cougar Circle, Niceville, FL 32578