



**Brunswick Junior High School Music Boosters
Music Camp Scholarship Application**

Name: _____ Age _____

School: _____ Grade _____

Parent/Guardian Name _____

Home Address: _____ Home phone number: _____

Major Instrument/Voice Part: _____

Secondary instrument(s) _____

Number of years studied (group or private) _____

Musical Organizations to which you belong or have belonged (include honors groups): _____

Name of Music Camp you will be attending: _____

Cost: _____ Dates of Camp: _____

Have you attended music camp before? _____ If so, list the camp(s) and years attended: _____

Why do you wish to attend music camp? _____

This application must be received on or before June 3

_____ student signature

_____ parent signature