



Educational Farm & Nature Preserve

Farm Camp Scholarship Application

Parent name: _____

Camper name: _____

Date of Birth: _____ Male/ Female _____

Mailing address: _____

Email: _____ phone: _____

Date of Camp applying for: _____

Has your family participated in programs at Stratford before? _____

Briefly explain why you are applying for a scholarship:

Household Income Range

\$20,000 - \$40,000 \$40,000 - \$60,000 \$60,000 +

Scholarships are available on a first come first serve basis. If you are not awarded a scholarship do you wish to register your child at the full camp fee?

Yes _____ No _____

For questions regarding this application please contact April Hoy, Farm Camp Director at AprilHoy@stratfordecologicalcenter.org or (740) 363-2548

Stratford Ecological Center 3083 Liberty Rd. Delaware, Ohio 43015