



## Camp Kingfisher 2025 Scholarship Application

PLEASE FILL OUT THIS FORM COMPLETELY AND SUBMIT WITH ALL REQUIRED ITEMS TO:

Camp Kingfisher

Chattahoochee Nature Center

Attn: Debby Head Camp Co-Director

9135 Willeo Rd.

Roswell, GA 30075

Or email to: [camp@chattnaturecenter.org](mailto:camp@chattnaturecenter.org)

Date of Application: \_\_\_\_\_

Camper Name: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

**This line is for office use only** \_\_\_\_\_

**Camp Kingfisher Scholarships are available to campers who might not otherwise get the opportunity to attend Camp Kingfisher at the Chattahoochee Nature Center. Camp Kingfisher Scholarships are awarded to campers who have a passion for the sciences or those who have not benefited from a summer camp experience.**

### Camp Scholarship Guidelines:

- Funding is limited, and scholarships are not guaranteed to all applicants.
- Each child awarded scholarship funds can attend a maximum of 3 weeks of camp per year (Oct- Sept).
- Incomplete applications or applications without signatures will not be reviewed
- To apply for the summer season, scholarship applications must be received before April 1.
- We must be able to call and leave a message or send you an email for you to receive a scholarship, please make sure you provide us with a valid email address or phone number.
- We require a response within 4 business days of the scholarship offer to hold your space.
- Scholarships are awarded based on financial need (not all applicants will qualify)
- An aide will be required for campers with special needs who would thrive best at camp with 1 on 1 support. (Camp families must provide their own aid if required).
- Scholarship offers will range between 25%-100% off of camp sessions.
- All scholarship applications are confidential. All information provided is processed by the camper directors.
- Please provide us with complete answers so we can make sure your camper receives the maximum number of points for their scholarship offer.

### Camp Scholarship Recipient Requirements:

- Submit completed application (1 per camper applying for a scholarship) with ALL required signatures.
- For families that were offered a scholarship for Summer 2024:
  - You qualify for the 2025 Scholarship Fund if:
    1. You were offered a scholarship but declined at least 2 weeks in advance.
    2. Or, you were offered a scholarship, accepted, and your child attended more than 80% of each of their awarded sessions (unless a medical note was documented and accepted by Camp Kingfisher office staff. 2025 scholarships are limited to a max of 3 weeks regardless of doctors note).

**\*If you were awarded and accepted scholarship money last season, and did not attend camp (for any reason) for 80% of the session, you do not qualify for a scholarship during the 2025 camp season.\***

--Fill out **one form for each child** applying for scholarship funds. Please be sure to write legibly --

**Section 1: REQUIRED SCHOLARSHIP CAMPER INFORMATION:**

Camper's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Current grade: \_\_\_\_\_ Grade in fall of 2025: \_\_\_\_\_ School: \_\_\_\_\_

What session(s) are you interested in for your camper to attend (please list sessions):

Choice 1: \_\_\_\_\_ Choice 2: \_\_\_\_\_ Choice 3: \_\_\_\_\_ Choice 4: \_\_\_\_\_

Parent/ Guardian Name(s): \_\_\_\_\_

Email address (parent/guardian): \_\_\_\_\_

Primary Phone (parent/guardian): \_\_\_\_\_ Secondary phone (parent/guardian): \_\_\_\_\_

How many people live in your household TOTAL? \_\_\_\_\_

How many children live in your household? \_\_\_\_\_

How did you hear about the Camp Kingfisher Scholarship Fund? \_\_\_\_\_

If through an organization, please provide us with the contact name and number of a case worker who referred you.

\_\_\_\_\_

Has your child attended camp before? \_\_\_\_\_ If so what camp? \_\_\_\_\_

Is this child currently enrolled in the Free/Reduced Lunch program at school? (Circle) Yes No

Does your family receive any other government assistance? (Circle) Yes No Please describe: \_\_\_\_\_

\_\_\_\_\_

Please indicate your total annual household income from all sources (including wages, interest income, investments, alimony, child support, social security, and public assistance): \_\_\_\_\_

My child requires an aid to thrive in a camp setting (Circle) Yes No Unsure

\*Aids must be provided by the camper's families and must be background checked by Camp Kingfisher/The Chattahoochee Nature Center. Family members may not be aids for campers who may require one. \*

**Section 2: REQUIRED SCHOLARSHIP CAMPER INFORMATION:**

Please tell us a little bit about your child. What is their favorite subject in school, how do they like to spend their free time, what hobbies do they have? \_\_\_\_\_

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Why would you like your camper to experience a session at Camp Kingfisher? \_\_\_\_\_

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Are there any financial factors/ special circumstances that you would like us to consider? \_\_\_\_\_

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How will your child benefit socially/emotionally from Camp Kingfisher? \_\_\_\_\_

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How will your child benefit specifically from our science and ecology focus at Camp Kingfisher? \_\_\_\_\_

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How will Camp Kingfisher benefit your child with school? \_\_\_\_\_

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If your child has received a scholarship from Camp Kingfisher before, how will an additional year of scholarship fund benefit your camper? \_\_\_\_\_

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If your camper has been to Camp Kingfisher before, why would **they** like to come back? \_\_\_\_\_

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**Recommended:** 2 letters of recommendation (can be from a school principal, teacher, tutor, mentor, community leader, scout leader, etc.), stating the social and/or academic benefit of the child attending Camp Kingfisher. **Please submit any letters along with this application.** Letters of recommendation from family members will not be accepted.

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By signing below, I affirm that the information I have provided is true and correct. I acknowledge, by signing this application for scholarship funds, that funds are not guaranteed. I will respect this process and those who are processing this application. I will honor the wishes of the persons who donated the funds, and my child will attend with honorable participation.

Signature by parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

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