



Cazadero Youth Music Camp 2005 SCHOLARSHIP APPLICATION

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.
ALL INFORMATION FURNISHED WILL BE HELD IN STRICT CONFIDENCE.

Camper information:

Name: _____ Male Female Age: _____
Address: _____ City: _____ Zip: _____
Telephone: _____ Mobile phone: _____
Birthdate: _____ Grade (fall 05): _____ Instrument: _____
School: _____ City: _____
Applying for _____ session

Parent/Guardian 1 information

Name: _____ E-Mail: _____
Address: _____ City: _____ Zip: _____
Telephone: _____ Mobile phone: _____
Occupation: _____ Employer: _____

Parent/Guardian 2 information

Name: _____ E-Mail: _____
Address: _____ City: _____ Zip: _____
Telephone: _____ Mobile phone: _____
Occupation: _____ Employer: _____

Applicant household information

How many children living at home: _____ Not in the home, but dependent? _____
Family total annual income: _____ Total # of dependents: _____
How much can you contribute toward the camp fee? _____ (\$40 non-refundable fee required)

If you feel your income level might adversely affect consideration for a scholarship, please attach a note of explanation.

Parent/guardian signature: _____ Date: _____

IMPORTANT:

• **Please send a standard cassette tape, standard VHS tape or CD recording.** Your tape should include two scales that are appropriate to the session you are applying for, and a short piece or excerpt that represents your playing. Accompaniment is optional. Mark your name clearly on the tape. Application deadline is April 1st; early receipt is strongly recommended. Tapes will not be returned.

• **A \$40 non-refundable application fee and \$100 tuition deposit is required** even if you are applying for a scholarship.

• **Please include a copy of the first page of your most recent Federal tax return** and any other documentation that will help us assess your need for a scholarship.

• All sessions are expected to fill this year. If your scholarship application and documentation isn't ready immediately, please send your camp application and deposit promptly to hold a space.

IMPORTANT: PLEASE COMPLETE BOTH SIDES OF THIS FORM

TO BE COMPLETED BY THE STUDENT: (Please print or type)

Please tell briefly describe why you think Cazadero Youth Music Camp will be of benefit to you and how you can contribute to the camp and your fellow campers.

Student signature: _____ Date: _____

TO BE COMPLETED BY SCHOOL OR PRIVATE MUSIC TEACHER:

How long has (student name) _____ studied with you? _____

Please comment on the student's achievement, attitude, potential and the contributions the camp and the student might make to each other. You may attach a separate letter if desired or write comments on this page.

Have any of your students ever attended Cazadero Youth Music Camp? Yes No

Music Teacher Information

Name: _____ E-Mail: _____
Address: _____ City: _____ Zip: _____
School: _____ Private teacher? Yes No
Address: _____ City: _____ Zip: _____
Telephone: _____ Mobile phone: _____

Teacher signature: _____ Date: _____

FOR APPLICANT:

Please mail scholarship application, copy of tax forms and audition materials to:

2005 Scholarships
Cazadero Performing Arts Camp
PO Box 7908 Berkeley, CA 94707

Call 510.527.7500 or email info@cazadero.org with any questions.