



2024 CAMP SCHOLARSHIP PROGRAM



Heal the Bay Aquarium Scholarship Fund

Will provide camp opportunities for children who have financial need.
Generous supporters within the community make these scholarships possible.

Eligibility Requirements

Please provide one of the following documenting financial need:

- Free/Reduced Lunch:
 - Qualification letter showing participant's first and last name;
 - OR 2023 or 2024 tax return (Form 1040, 1040EZ, 1040A, etc.) to show eligibility for free/reduced lunch based on federal income guidelines.
- Medi-Cal/Low-Income Health Insurance: Current dated qualification letter or medical card showing applicant's first and last name.
- Other documentation noting financial need may be accepted on a case-by-case basis.

Scholarship Policies

- Applicants must provide additional documentation to verify eligibility. Incomplete applications will not be considered. See Eligibility Requirements section above.
- Due to limited availability, only one scholarship will be awarded per household, and limited up to \$400 per household (1 full week registration).
- All scholarships will be awarded on a rolling, first-come, first served basis.
- Acceptance/denial letters will be e-mailed within 1-2 weeks after applications are received.
- Cancellation policy: Due to the limited number of scholarships, we ask that you please notify us of a cancellation as soon as possible, so that we can work to either reschedule your camp week, or award another camper the scholarship position.

Application instructions:

Section 1: Short essay or drawing to be completed by the prospective camper.

Section 2: To be completed **in full** by parent or legal guardian.

Section 3: Please list financial circumstance to be considered and documentation provided

Section 4: Please select which week(s) of camp you are interested in, and preference.

Applicants must attach a **letter of recommendation (email with tagline: CAMP SCHOLARSHIP APPLICATION: "Camper's name")** from a non-parent adult over 18 years old.

Please mail, email, or drop off completed application at least 2 weeks prior to camp start date to:

Heal the Bay Aquarium
Camp Scholarship Fund
1600 Ocean Front Walk
Santa Monica, CA 90401

or email: rramos@healthebay.org

**** INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****



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SECTION 1 – To be completed by prospective camper

Why do you want to attend Camp at the Heal the Bay Aquarium this year?

Camper Signature:

Date:

SECTION 2 – To be completed in full by prospective camper's parent or legal guardian

Camper's Name: _____

Camper's *Current* Age and Grade: _____

Camper's Home Address: _____

Camper's Home Phone #: _____

Parent's / Legal Guardian's Name: _____

Parent's / Legal Guardian's Daytime Phone #: _____



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SECTION 3 – To be completed in full by prospective camper’s parent or legal guardian

Please list any financial circumstances or attached documentation that you would like to have considered as a basis for recommending this applicant for a scholarship.

I certify that the financial situation of the child nominated warrants that he/she/they be given the opportunity to attend Aquarium Science Camp free of charge.

Parent / Legal Guardian (please print)

Parent / Legal Guardian Signature

Date

Email address

SECTION 4 – Circle the week of camp that you’d like your child to attend (may select multiple if availability is flexible).

Schedule:



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Summer Camp - Week 1: Open Ocean; June 24–28 (Grades K-2)

Summer Camp - Week 2: Frozen Ocean; July 1–3 (SHORT WEEK) (Grades 3-5)

Summer Camp - Week 3: Coral Reefs; July 8–12 (Grades 6-8)

Summer Camp - Week 4: Kelp Forests; July 15–19 (Grades K-2)

Summer Camp - Week 5: Deep Sea; July 22–26 (Grades 3-5)