

**A&M Consolidated High School
Band Camp Scholarship Application**

Name: _____

Address: _____

Phone #: _____

E-Mail: _____

Name of Band Camp You Wish to Attend: _____

Dates of Camp: _____

Cost of Camp: _____

In brief, please explain what you hope to get out of your band camp experience in the space below.

How and/or why do you feel you are deserving of a band camp scholarship?

Turn this completed form into the director's red box in the office.