



Savoy Recreation Center
Youth Summer Camp Scholarship Application

The Savoy Recreation Center awards partial and full scholarships for residents of Savoy based on financial need and availability of funds. Applications need to be filled at least 2 weeks before the registration deadline for the camp you wishing to enroll in. All information is confidential.

Name of Participant _____ Age _____

Parent/Guardian Name(s) _____

Street Address _____

City, State, Zip _____ Home Phone _____

***Please include proof of address (copy of your telephone bill, electric bill, etc.)**

Please list all family members, including you, living in household:

Last Name	First Name	Relation	Age

Employer(s) Name _____

Work Phone _____

Work Phone _____

Work Phone _____

Work Phone _____

Monthly Gross Income:

Source	Self	Spouse
Full Time Employment		
Part Time Employment		
Social Security		
Child Support		
Other (please list)		

*** Please include a copy of your most recent tax return and two pay stubs.**

Requested Camp	Actual Cost	Parent Fee (office use only)
1.		
2.		
3.		
4.		
5.		

I certify that all the above information is true and correct and that all income is reported. Savoy Recreation Center staff may verify the information.

Signature of Parent/Guardian _____ **Date** _____

Please return application with all documents attached to the Savoy Recreation Center, 402 W Graham Drive, Savoy Il 61874.

Office Use Only	
Program #1 Fee Waived _____	Approved By _____
Program #2 Fee Waived _____	Proof of Address? _____
Program #3 Fee Waived _____	Tax Return? _____
Program #4 Fee Waived _____	
Program #5 Fee Waived _____	