

BCMTA SUMMER MUSIC CAMP REQUIREMENTS

1. Summer music camp scholarships are available to students of Broward County Music Teachers Association members for all instruments and voice. **Deadline for application is April 21.** Scholarships will be awarded based upon merit of the applicant's musical accomplishments.
2. Applicant must have studied at least 6 months with a BCMTA teacher.
3. Applicant must be a minimum of 6 years of age by the application deadline, and no older than in grade 11.
4. Each applicant must submit the following to the Summer Music Camp Scholarship Committee by April 21:
 - a. Completed and signed **application** form
 - b. A list of musical activities in which the student has participated, i.e.:
 - Church or Synagogue
 - School band, chorus, talent show, musical
 - Retirement homes
 - Fairs
 - Community clubs and organizations
 - Youth Orchestra of Florida
 - BCMTA activities, including Student Day, Musicthon, Recitals, and Competitions
 - c. Documentation verifying the musical activities, i.e. concert program, certificate or signed paper from director of organization or activity.
 - d. Student's essay on why he/she wants to go to summer camp
 - e. Proof of deposit to music camp.
5. The Summer Music Camp Scholarship Committee may award \$2,500 in scholarships to three age divisions (amounts to be determined by the scholarship committee):
 - Division I Age 6 through Grade 5
 - Division II Grades 6 through 8
 - Division III Grades 9 through 11
6. Scholarship money will be sent directly to the music camp. *Scholarship money may not be used as down payment to a music camp*, but only as part of the final payment once the student has absolutely committed to attending.
7. Applications and documentation can be emailed or mailed with a postmark no later than April 21.

BCMTA SUMMER MUSIC CAMP SCHOLARSHIP APPLICATION
Application Deadline: April 21

Student's Name _____ Date of Birth _____

Student's Address, City, Zip: _____

Parent's Phone _____ Parent's email: _____

Current Grade in School _____ Teacher's Name _____

Teacher's Phone _____ Teacher's email _____

Length of Musical Study _____ Length of Study with Current Teacher _____

Summer Music Camp Choice:

Name of Camp _____

Cost of Camp: _____ Dates You Will Attend: _____

School: _____

Mailing Address: _____

City, State, Zip: _____

Contact Person at Camp: _____

Phone Number of Contact Person: _____

Email of Contact Person: _____

I understand that the decision of the Summer Music Camp Scholarship Committee is final.

Student's signature

Parent's signature

Enclose with this application: *Postmark deadline—April 21*

1. List of musical activities in which student has participated.
2. Documentation of participation in musical activities.
3. Student's essay on why he/she wants to go to summer camp.
4. Proof of deposit to summer camp.

For clarification, contact BCMTA Summer Music Camp Scholarship Chairman:

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