



# Kiel Municipal Band Summer Music Camp Scholarship

## Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Year you joined the KMB: \_\_\_\_\_ Instrument Played: \_\_\_\_\_

Are you enrolled in your school instrumental program for next year?  Yes  No

### Camp Information

Where are you planning to attend music camp this year? \_\_\_\_\_

How much does it cost for this camp? \_\_\_\_\_

### Participation Background

*What musical activities have you participated in?*

*Why would you like to attend a music camp?*

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*Applicant Signature      Date*

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*Parent Signature      Date*

Please return this form to Jon Meyer, MariJane Weir, or Karren Cobble of the Kiel Municipal Band by June 19<sup>th</sup> to be considered for the scholarship. If chosen a s recipient, the scholarship will be sent directly to the camp the applicant is attending.