

Brooks Bird Club Scholarship Application

First Name	Middle Initial	Last Nam	e	
Mailing Address	(City	State	_Zip
Home Phone	Cell Phone			
Emergency Contact Phone		E-Mail Address_		
Indicate the amount applying for:				
□ Full Scholarship □ Partial Schol	arship of \$			
* If 14-18 years old, include parent/gua	rdian info:			
Parent/Guardian Name				
Mailing Address	(City	State	_ Zip
Home Phone	Cell Phone			
Emergency Contact Phone				
\Box I grant permission to my son/daught for transportation to and from the even		t and accepting re	esponsibility	
Parent/Guardian Signature]	Date	
For which meal will you arrive?		Dep	part?	
*Requirements- Please initial that you a	agree to complete the	ese.		
A short essay about my int	terest in birds or natu	are. (due with app	lication)	
A letter of recommendation	on from a teacher, me	entor, or nature cl	ub member. (new studer	nts only)
A short report mailed to the	ne scholarship chairn	nan about your ex	perience at the conclusi	on of the event.
Applicant's Signature		Date_		
Check here for county maps.	Cost approximately \$	\$5.50 payable at c	amp.	
*For the good of all concerned, every The membership rate for students is \$				
	mail form, essay, and			
The Brooks Bird Club Scholarshi	ip Committee, c/o C	Cindy Slater, 125	North Center St., Bridg	geport WV 26330
Scholarship is for the current Brooks I and does not imply a monetary gift to t	,	2024 The Br	ooks Bird Club, Inc. brooksbirdclub.org	