



## Audubon Society of Portland Camp Scholarship Application

The Audubon Society of Portland offers scholarships for individuals in need of financial assistance. Audubon works to inspire all people to love and protect nature, and we believe that income should not be a barrier in a person's path to connecting with nature. **All applications are considered on a case-by-case basis.**

The information requested is confidential and necessary to determine scholarships awarded. Please fill out this form completely and mail or e-mail to Ian Abraham, Youth Programs Manager: [iabraham@audubonportland.org](mailto:iabraham@audubonportland.org). You will be notified within **14** days if you are awarded a scholarship. If you require any assistance in filling out this form please call 971-222-6120.

*After receiving your call, please send any remaining payment to:*

**Audubon Society of Portland Camps  
5151 NW Cornell Rd. Portland, Oregon 97210.**

Child's Name \_\_\_\_\_ Grade \_\_\_\_ Gender \_\_\_\_ Date of Birth \_\_\_\_\_

Your Name \_\_\_\_\_ Relationship \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Class Title & Date:** \_\_\_\_\_

**Class Tuition:**            **How much can you pay?:**

Number of adults living in the home: \_\_\_\_\_      Number of children living in the home: \_\_\_\_\_

### Total Yearly Family

#### Income:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> 0 to \$15,930        | <input type="checkbox"/> \$32,571 to \$36,730 | <input type="checkbox"/> \$53,372 to \$57,531  |
| <input type="checkbox"/> \$15,931 to \$20,090 | <input type="checkbox"/> \$36,371 to \$40,890 | <input type="checkbox"/> \$57, 532 to \$61,691 |
| <input type="checkbox"/> \$20,090 to \$24,250 | <input type="checkbox"/> \$40,891 to \$45,051 | <input type="checkbox"/> \$61,691 to \$65,851  |
| <input type="checkbox"/> \$24,251 to \$28,410 | <input type="checkbox"/> \$45,051 to \$49,211 | <input type="checkbox"/> Over \$65,851         |
| <input type="checkbox"/> \$28,411 to \$32,570 | <input type="checkbox"/> \$49,212 to \$53,371 |  |

### Parent or Guardian statement of need

What are some of the things we should consider when reviewing your family's application for a scholarship?

Question for your future camper: *Why do you want to come to a camp?*

Does your family qualify for any of the following programs (check all that apply)

- SNAP (Supplemental Nutrition Assistance Program)
- TANF (Temporary Assistance for Needy Families)
- SSI (Supplemental Security Income)
- Free and Reduced Lunch

**Optional Information**

Answers for the following questions are optional, and are used by the scholarship committee to help determine scholarships awarded.

With which race(s)/ethnicity(s) do you identify?

- Asian
- Black/African American
- Caucasian/White
- Latina/Latino or Hispanic
- Middle Eastern
- Native American/Alaska Native
- Native Hawaiian/Pacific Islander
- Slavic or Russian
- Other \_\_\_\_\_

Have a disability?            No        Yes                    Veteran:            No        Yes

What is the primary language spoken in your household? \_\_\_\_\_

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

**For Office Use Only:**

Notes:

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Regular Program Fee: \_\_\_\_\_

Date of Returned Call: \_\_\_\_\_ Scholarship Award: \_\_\_\_\_

**Please Fill out the Registration Form on the Next Page**

# Audubon Society of Portland Camp Registration Form



- ◆ **To reserve your spot** send completed registration form to: **Audubon Society of Portland**  
**5151 NW Cornell Rd. Portland, OR. 97210** or fax to (503) 292-1021
- ◆ Don't forget you can register online: go to **www.audubonportland.org/trips-classes-camps/camps**
- ◆ Confirmation e-mails will be sent within 2 weeks of receiving registration form and payment. You will be called if space is not available or we need to cancel a class. In either case, a full refund is given.
- ◆ Cancellation policy: You must cancel your registration 22 working days prior to the beginning of class to receive a refund (-\$50 processing fee).
- ◆ Partial scholarships are available. Please call for a scholarship application.

.....  
Child's Name: \_\_\_\_\_ Grade: \_\_\_\_ Gender: \_\_\_\_ Date of Birth: \_\_\_\_\_

1<sup>st</sup> Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Class Name:** \_\_\_\_\_ **Fee:** \_\_\_\_\_

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**Class Name:** \_\_\_\_\_ **Fee:** \_\_\_\_\_

**Total: \$** \_\_\_\_\_

Are you a member of Portland Audubon  Yes  No

**I wish to pay by:**  **Check (Audubon Society of Portland) (Checks preferred)**

Credit Card (a 3% charge is added to credit card payments)

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Friends of Audubon Society of Portland Membership Registration:**

(Please write a separate check)

- \$25 Introductory  \$35 Individual  \$45 Family  \$60 Wren  
 \$100 Goldfinch

(cont'd)

**Health Form**

Are there any **health concerns** we should consider when planning your child’s class? (Casts, Asthma, Allergies, etc...) List medications, when taken, and purpose: Attach separate page if necessary.

Describe any **behavior concerns** that should be considered for group learning (ADD, Hyperactive, etc.)

Describe any Dietary Restrictions that your child might have (Gluten Free, Vegetarian, etc.)

**Emergency Numbers** (if parents can’t be reached):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I give my permission for Audubon Society of Portland staff to provide first aid for the child named above and to take the appropriate measures including contacting the Emergency Medical System and arranging for transportation to Good Samaritan Hospital or the nearest medical facility. I agree to indemnify and hold Audubon Society of Portland, its officers and employees, harmless from claims of losses for any bodily injury or property damage which occurs or is alleged to have occurred as a result of negligence of participant.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Health Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

**Medications:**

We will ask you to fill out a “Medical Release Form” for any medications that need to be administered during the duration of your child’s participation in an Audubon Camp. We have the following medications on-site and in our first aid kits which are used to manage injury or illness.

**Please check the medications that your camper cannot be given.**

- Ibuprofen (Advil, etc.)
- Acetaminophen (Tylenol, etc.)
- Oral antihistamine (Benadryl/Zyrtec)

**Photo/Video Release**

I give the Audubon Society of Portland the right and unrestricted permission to copyright and/or use and/or publish (1) the image or likeness on videotape, and (2) photographic pictures of the individual named on this form, including but not limited to, the promotion of the Audubon Society of Portland and its programs.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_