



S P A R T A N B U R G
SCIENCE CENTER
excite • engage • educate

2024 Summer Camp Scholarship Application

Child's Name _____

Parent Name _____

Address _____

Phone: _____

Email _____ @ _____

I am applying for a scholarship for my child to attend summer camp at the Spartanburg Science Center. I can provide \$_____ toward the total cost. I am applying due to needing help with the cost of the camp. I understand this is not a guarantee that I will qualify for the scholarship.

I am applying for the following reason:

Signature _____

Please return this to Mary Levens at mlevens@spartanarts.org or drop it by the Spartanburg Science Center.