



Scholarship Application

A limited number of scholarships are available from the Catherine Taylor Fund, established by Bernier Insurance, Inc. and the Christopher T. Domian Fund, established by Gary S. Domian. New Hampshire Charitable Foundation: Dorothy & Paul Hobbs Seacoast Fund.

Please fill out the application and registration below and include a letter of recommendation from your child's teacher. Please submit your application by April 21, 2017, to Rochester Opera House, 31 Wakefield Street, Rochester, NH 03867. Applicants will be notified of awards by May 1, 2017.

Scholarships do not cover the cost of camp tee shirts, field trip fees or special lunches. One child per family may qualify for a camp scholarship. Family camp discount does not apply to families with a child receiving a scholarship.

Today's Date: _____

Child's Name: _____ **Age:** _____

Birth Date: _____ Gender: M / F

Parent/Guardian Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: _____ Email (*required*):* _____

Have you previously applied for this scholarship? NO YES (Year: _____)

If your child receives a scholarship, Rochester Opera House requests that the student write a thank you note, which will be forwarded to the funders.

My Child is interested in (circle one):

- Acting Out!: (Ages 8–12)

- Broadway Kids: (Ages 4–7)

- Broadway Kids join Acting Out!: (Ages 6-12)

- Spotlight on Musical Theatre: (Ages 13+)

Tell us why you would enjoy attending Summer Theatre Camp (*Ages 9 and under: Parent may help with reply*):

Letter of Recommendation Attached Completed Registration Attached

Please Print Applicant's Name: _____

Applicant's Signature: _____

Parent/Guardian Signature: _____ Date: _____

How should we notify you regarding the scholarship decision? _____

Letter Of Recommendation Form

Dear _____, (Teacher's name)

My child, _____, is applying for a scholarship for the Rochester Opera House Theatre Camp. Please indicate below why you feel he/she is deserving of a scholarship.

Thank you! _____ (Parent Signature)

Teacher's Name: _____

School Name: _____

Email: _____ Phone: _____