4-H Foundation of NH 2019 Barry Conservation 4-H Camp Scholarship Application Form

Return to:
4-H Foundation of NH
Coös County 4-H
629A Main Street
Lancaster, NH 03584

NOTE: Scholarship selection process will start after March 1, 2019.

County

Camper Name ___________________________________________________________ Age ______

Address ____________________________________________ Street/PO Box Town State Zip

Phone __________________________ Email ________________________________

Parent/Guardian Name ________________________________________________

Parent/Guardian Address if different than camper

________________________________________ Street/PO Box Town State Zip

Phone __________________________ Email ________________________________

Parent/Guardian Cell Phone ________________________________

Have you already enrolled for 2019 Barry Conservation 4-H Camp? YES NO

Name of camp week(s) attending (see our website https://extension.unh.edu/programs/barry-conservation-4-h-camp

4-H Shooting Sports
Mini-Camp
Fish Camp
4-H on the Wildside
Hunter Education
North Country Adventure
Junior Conservation Officer

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Have you previously attended Barry Conservation 4-H Camp?  

YES  NO

Are you a NH 4-H Member?  

YES  NO

Do you have any siblings attending camp?  

YES  NO

If yes how many?

Are you receiving camp scholarship dollars from any other source?  

YES  NO

If yes from whom __________________________  How much __________

Amount requesting from 4-H Foundation of NH? _______. We do not give full scholarships.

Why do you want to go to Barry Conservation 4-H Camp this summer?

Applicant and Parent/Guardian: Please sign and date below.

We realize we are responsible for all costs of camp above the dollar amount awarded by the 4-H Foundation of NH. Further, I agree to send a note of thanks to the 4-H Foundation of NH. I also understand if for any reason I do not attend Barry Conservation 4-H Camp, I will reimburse the 4-H Foundation of NH in full.

____________________________________  ______________________
Applicant (youth)  Date

____________________________________  ______________________
Parent/Guardian  Date

Parent/Guardian – Please provide any additional information that will help us make our decision. (Please attach separate sheet.)