

Beyond Blindness Inclusive Summer Camp

August 2nd-6th & August 9th-13th 2021

Scholarships Qualifications:

- Camper must have a diagnosed visual impairment and/or other developmental delay
- Demonstrated financial need.

To apply, complete the attached application and return it by **7/15/2021**.

Please submit all completed financial aid applications to **jacob.garcia@beyondblindness.org**

Financial Aid Application

The following 3 sections must be complete to be considered:

- I. General Information
- II. Financial Need
- III. Written Statement

I. General Information:

First and Last Name of Camper: _____

Visual diagnosis and/or developmental delay (if applicable): _____

Camper Date of Birth: _____

First and Last Name of Parent: _____

Mailing Address: _____

Phone Number: _____ Email: _____

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II. Financial Need:

Total # of persons living in your household: _____

| Full Name | Relationship | Age | Income Source | Gross Yearly Income |
|-----------|--------------|-----|---------------|---------------------|
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Total Household Gross Annual Income (a copy of the first page of your 2020 tax return is required):

\$ _____

III. Written Statement:

In 100 or more words (attach a separate document if needed) describe why your child would benefit from attending the Beyond Blindness inclusive summer camp:

Note: All applications are to be submitted to jacob.garcia@beyondblindness.org

Please remember to submit:

1. A copy of the first page of your 2020 tax returns.
2. Your written statement.