



VisionTech Camps & Classes

231 Market Place #529 San Ramon, California

Phone: (925) 984-1215 e-mail inquiry@visiontechcamps.com

Scholarship Application

Summer Camp 2007

Camper Information

Parent/Guardian Information

Name

Name(s)

Mailing Address (Include Street and Apt#)

E-Mail Address(es)

City _____

Home Phone _____

State _____ Zip _____

Work Phone _____

Cell Phone _____

Birth Date

Grade in Fall

How did you hear about VisionTech Camps?

Camp Name _____

Amount Requested _____

SCHOLARSHIP PAYMENT & REFUND POLICY

If a scholarship is awarded, you will be notified via mail/phone. The remainder of the tuition fees is due within a week of this communication to hold your child's place in the class and secure scholarship funding. Students will not be allowed to participate in the class if complete payment is not made in a timely manner. Due to the limited number of scholarships and the great amount of families needing assistance, we are unable to give refunds of any type to campers on scholarships.

- I understand that I am responsible for the balance of tuition after the scholarship funds
- I understand that the account balance must be paid in full before my child can attend class

I have included the following documents with this application

- A one page letter explaining why your child should be considered for the scholarship
- All supporting documents like pay stubs, copy of tax returns, and any other document

I accept the above statements & Scholarship Payment & Refund Policy

Date: _____

Signature of Parent / Guardian