

# **Blossom Valley Singers Music Camp/Summer School Grant**

**c/o Anita Stushnoff**

**213 - 26th Ave N. Creston BC V0B 1G1**

**250-428-5272**

A grant of up to \$400 for registration is available to 2 deserving music students to attend a (Canadian) music camp/summer school of the student's choice. This is payable directly to the camp/school or as reimbursement whereupon a paid registration receipt for the camp/school is produced.

## **ELIGIBILITY:**

1. Applicant must be a secondary school student, grade 8 through 11. Consideration will be given to younger students if there are no secondary school applicants.
2. Applicant must be a student of a local music teacher in the Creston area.
3. Applicant must be able to meet all the qualifications of their chosen camp/school.

## **SELECTION OF AWARD WINNER:**

- Completed forms and the reference completed by the music teacher must be received at the above address/fax number by **April 15.**
- The winner of this award is to be determined by the Executive of the Blossom Valley Singers and will be notified by **April 30.**

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## APPLICATION FOR GRANT

(must be received on or before April 15)

Last Name \_\_\_\_\_ Given Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_

Name of Parent(s)/Guardian \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Music Teacher \_\_\_\_\_

Instrument \_\_\_\_\_ Level \_\_\_\_\_

Name, address and program of the Music Camp/Summer School you plan to attend \_\_\_\_\_  
\_\_\_\_\_

Please prepare and attach a brief statement on your musical goals and why you think you should be considered for the grant.

If chosen as the recipient of this grant I agree to prepare a written or oral report describing the Music Camp/Summer School attended, noting the things I liked or disliked. I will present this report to the Blossom Valley Singers in September.

Applicants signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_

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## **REFERENCE TO BE COMPLETED BY MUSIC TEACHER**

(must be received on or before April 15)

Name of Applicant \_\_\_\_\_ Instrument \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Please speak to the candidate's music ability, character, considering responsibility and commitment.

Signature \_\_\_\_\_ Date \_\_\_\_\_