Lawrence Rodamer Summer Camp Scholarship Application

The Lawrence Rodamer Scholarship Fund, through the Goodridge Family Resource Center, is offering a limited number of summer camp scholarships. The Goodridge Family Resource Center Advisory Council is committed to assisting as many Goodridge students as possible in their quest to experience their own summer camp adventure.

The FRC Advisory Council will fund up to 3 summer camp applicants (not to exceed $250 each/$750 total).

Each camper applicant must provide the following:
- A letter of recommendation for your child to attend summer camp from someone not related to you. (Examples: teachers, principals, church members, neighbors, etc.)
- Parent application filled out
- Signature on form holding harmless Boone County Schools, Goodridge Family Resource Center and Goodridge Family Resource Center Advisory Council and all agents thereof from any injuries resulting from attendance at said camp scholarship is awarded to.

General Information:
- Applicants are evaluated without regard to race, religion, natural origin, sex or physical ability.
- Funding is limited and scholarships are not guaranteed to all applicants.
- Scholarships may not be awarded two years in a row.
- Incomplete applications will not be reviewed.
- Scholarships will be awarded based on need and merit.
- Scholarship Funds will not be available until after June 1, 2018

☐ Submit completed application
☐ Submit letter of recommendation
☐ Provide a brochure, flier or website for camp child would like to attend,
☐ Complete and submit follow-up report and art work by August 31, 2018.

To receive consideration for a scholarship, PLEASE FILL OUT THIS FORM COMPLETELY AND SUBMIT WITH THE REQUIRED ITEMS TO: Goodridge Family Resource Center Coordinator by May 10, 2018

All fields are mandatory.

Please fill out one form per child.

Name of Child_________________________________________ Birth date______/_____/_______
Parent/Guardian(s) Name(s)________________________________________________________
Mailing Address______________________________________________________________
City_________________________State____________________ZIP______________________
Day Phone (__________________)_____________________________________________________
Family Email______________________________________________________________
Current Grade & Teacher________________________________________________________
How many children currently live in the household? _____

Please list their ages: __________________________

What Summer Camp is your child interested in attending? (please attach brochure, flier or website of the camp)

________________________________________________________

When is the above Summer Camp? _________________________________________________________________

Please list the date if there is a deadline for registration. ____________________________________________

Fee Amount you are requesting: $____________________

What do you hope your child will gain from this experience?

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

Is your child attending any other summer camps this summer? Circle Yes No

If yes, which one(s)? ________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

Follow-Up

______ (Initial) I understand my child will be required to prepare the Post-Summer Camp Report and a poster or drawing by August 31, 2018. Follow-up paperwork will be provided upon awarding of scholarship.

_____________________________  ____________________________
Parent Signature                  Date
GOODRIDGE ELEMENTARY WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

1. In consideration for applying for a Goodridge Elementary/Lawrence Rodamer Summer Scholarship, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE Boone County Schools, Goodridge Elementary, Goodridge Family Resource Center and Goodridge Family Resource Center Advisory Council, their officers, servants, agents, and employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, for taking part in any summer camp supported by the Lawrence Rodamer Summer Camp Scholarship.

2. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASEES from any loss, liability, damage or costs, including court costs and attorney’s fees that may incur due to my taking part in any summer camp supported by the Lawrence Rodamer Summer Camp Scholarship.

3. It is my express intent that this Release and Hold Harmless Agreement shall bind the members of my family and spouse (if any), if I am alive, and my heirs, assigns and personal representative, if I am not alive, shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the Commonwealth of Kentucky.

4. I UNDERSTAND THAT THE RELEASEES WILL NOT BE RESPONSIBLE FOR ANY MEDICAL COSTS ASSOCIATED WITH AN INJURY MY CHILD MAY SUSTAIN AS A RESULT of their taking part in any summer camp supported by the Lawrence Rodamer Summer Camp Scholarship.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Parent/Guardian Legal Signature _________________________

Date ________________________________
Post-Summer Camp Report
Due by August 31, 2018

PLEASE FILL OUT THIS FORM COMPLETELY AND SUBMIT WITH THE REQUIRED ITEMS (drawing or poster) to: Goodridge FRC, 3330 Cougar Path, Hebron, KY 41048 or email to laura.mosqueda@boone.kyschools.us

Name of Child___________________________________________________________

Birth date_____/_____/_____

Mailing Address__________________________________________________________

City________________________State____________________ZIP____________________

Day Phone (____) ___________________ Family Email___________________________

Grade and Teacher________________________________________________________

Where did you attend Summer Camp? ______________________________________

Which Summer Camp did you attend? ________________________________________

When did you attend Summer Camp? (please list dates) __________________________

Parent/Guardian – You may fill out the following for your child but please put in their words.

What did you learn at Summer Camp?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What was your favorite part of Summer Camp? Why?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________