



Sound Experience Youth Scholarship Application

Name (of teen): _____

Address: _____

Phone: _____ Email _____

Grade in fall 2020 _____ School attending: _____ Applying for: ___

Fantastic Voyage- (July 19- 23) ___

Girls at the Helm- (July 25th-28th) ___

Please note: Families are responsible for transportation to and from the ship, including trips in the San Juan Islands.

Family Financial Information:

Father (or guardian 1) Mother (or guardian 2)

Name _____

Occupation _____

Employer _____

Expected 2020 Income \$ _____ \$ _____

How many family members currently live in your household? _____

Tuition for the Fantastic Voyage Program is \$650 for Members and \$770 for non-members.

Girls at the Helm tuition is \$525 for Members and \$615 for non-members.

Apprenticeship tuition is \$60/day.

How much financial assistance are you requesting at this time? \$ _____

Please describe why you are requesting assistance at this time (if more room is needed, please feel free to use back or additional paper):

What other information do you think would be helpful for us to know about your teen or scholarship need (please feel free to use back or additional paper)?

We, the undersigned, certify to the truth of the statements made in this application. Signed

_____ Date _____ (Father or guardian 1) Signed

_____ Date _____ (Mother or guardian 2)

Please fill out the above information and e-mail, mail or fax: Susan Brittain c/o Sound Experience, PO Box 1390, Port Townsend, WA 98368 or 360-379- 0439(fax). Please call Susan at 360-379-0438 x1 with any questions