



NCSS SCHOLARSHIP APPLICATION FOR NCYC SAIL CAMP

Child's Name: _____ Age _____ (min age 7 yrs.)

Street Address: _____ City _____ State ____ Zip _____

Adult Sponsor's relationship to child _____

Adult Sponsor Name _____

Street Address: _____ City _____ State ____ Zip _____

Phone _____ Email _____

Adult Sponsor Signature _____ Date _____

Adult Sponsor Information;

Are you a NCYC member? Yes – No NCYC Membership # _____

Other affiliation: ILYA/AYC Membership _____ Non-Member _____

Has child attended NCYC Sail Camp before? Yes - No

Has the child received a scholarship before? Yes – No; From ____ NCSS ____ MBC ____ Other

Please include letter from child stating why they would like to attend NCYC Sail Camp along with NCSS Scholarship Application and mail to address below (deadline is May 1st).

****Note this form is for scholarship only and is not an application for Sail Camp registration****

**North Cape Sailing School
Attn: NCYC Sail Camp Scholarship Application
11850 Toledo Beach Rd.
LaSalle, MI 48145**

Date received _____ Approved / Denied _____

Reason: _____

Did child attend NCYC Sail Camp this season? Yes - No Which session _____