

Camp NIM Scholarship Application

Thank you for your interest in a scholarship opportunity with Camp NIM. All parents/guardians must fill out the form in its entirety, and have the camper complete their portion as well. Please contact Randallynn Smith with any questions!

Rsmith@nationalinfantryfoundation.org or 706-685-2614

Parent/Guardian Name: _____

Camper Name: _____

Camp Session/Dates: _____

Phone Number: _____

Email: _____

Parent/Guardian: In the space below, please explain how this scholarship would benefit you and your camper. You may include things like financial need, social need, or anything you feel is relevant to your situation.

Parent/Guardian: _____

Camper Name: _____

Camper Age: _____

In the space below, please explain why you would like to come to camp and how it may benefit you. If you need help from an adult, you may have them write/type your response.

For Office Use: National Infantry Museum Foundation

Staff Member Receiving Form: _____

Department/Event: _____

Notes: _____