Nebraska Range Youth Camp Grant Form

Applicants Name: ________________________________ Date of Birth: ________________________________
Address: __________________________________________ County: ________________________________
City: ________________________________ State: _____ Zip: ______ Male: ____________ Female: ____________
Name of Parents or Guardian: _________________________________________________________________
Does Applicant reside within the Upper Elkhorn NRD: __________________________________________
Name of School: ________________________________________________________________
Has the Applicant ever attended the Nebraska Range Youth Camp: _______________________________
Previous Year(s) Attended: ________________________________________________________________
List of School and Community Activities:

Awards and Honors (from last 2 years):

Why do you want to attend the Nebraska Range Youth Camp:

If you are awarded a camp grant, would you be willing to present a written report to the Upper Elkhorn NRD Board of Directors describing your experiences at camp? ________________________________

Applicant’s Signature ________________________ Date ________________________ Phone Number ________________________

Office Use Only:
Date Application Received: ________________ Date of Approval: ________________ by: ________________