



# Summer Camp Application



## Participant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Gender: Male Female Date of Birth \_\_\_\_\_ E-mail \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_

Race (optional): African-American Asian Native American Pacific Islander Caucasian Hispanic Other

Family Income (Required): \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Home # \_\_\_\_\_ Work/Cell # \_\_\_\_\_

## Participant Involvement

How many years have you been involved with The First Tee of Connecticut? \_\_\_\_\_

Program Location: \_\_\_\_\_ TFTCT Instructor(s)/Coach (s) \_\_\_\_\_

### TFTCT Activities/Events that you have participated in (check all that apply):

- In-School Instruction                      Travel Team                                      Squad Program
- Group Lessons                              Travelers Championship Family Day                      Worked/Volunteered for TFTCT
- Team Program                              Mentoring    Other \_\_\_\_\_

## Participant Essay – 250 words or less

Explain why you would like to participate in The First Tee of Connecticut’s Summer Camp. What do you hope to learn about the game of golf and/or yourself?

## Interview

Finalists may be contacted by TFTCT by phone for a brief (10 minute) interview.

Please list the weeks that you are available to attend in order by preference.

#1 \_\_\_\_\_ #2 \_\_\_\_\_

#3 \_\_\_\_\_ #4 \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Return your completed application by Friday, May 24 to:**

**The First Tee of Connecticut**  
**Attn: Scholarship Committee**  
**55 Golf Club Road**  
**Cromwell, CT 06416**  
**(860) 788-6612 Fax**  
[info@thefirstteect.org](mailto:info@thefirstteect.org)