STRAWBERRY JAM CAMP SENIOR SCHOLARSHIP APPLICATION

(age 60 & over as of July 20, 2026)

Name:							
Age:							
Address:							
City:							
State & Zip Code:							
Telephone:							
Email:							
Which workshop are you completing the scholarship for? Please select only one.							
	Instrument Worksh	ор					
☐ Songwriters Workshop							
ANSWER ONLY ONE OF THE FOLLOWING:							
1.	1. What instrument(s) do you play? Instrument Scholarship						
		✓ If Primary	✓ :	If Primary			
	☐ Banjo		☐ Guitar				
	☐ Dobro		☐ Mandolin				
	☐ Fiddle		☐ Bass				
2. How long have you been writing songs? Songwriter's Scholarship							
	☐ Newby, zip, zero, no experience						
	☐ Years (please fill in # of years)						
What are your personal goals for your instrument(s) or song writing?							

	Why do you think you would be a good Strawberry Jam Camp Scholarship recipient?				
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Are you applying for a:	Full-Scholarship	Half-Scholarship			
Would you be able to attend if you do not receive this scholarship? Please explain:					

]	Please list two refere	nces, name, phone number & email address.
	Name:	
	Phone Number:	
	Email Address:	
	Name:	
	Phone Number:	
	Email Address:	

All applications MUST be received by June 15, 2026

Applications can be:

- ✓ snail mailed to: Strawberry Jam Camp Scholarships, PO Box 400, Strawberry Point, IA 52076
- ✓ email to: strawberryjamcamp@gmail.com

These Scholarships are made available through the generosity of the Upper Mississippi Gaming Corporation and Individuals who have donated to the Strawberry Jam Camp Scholarship Fund.

