



Early Investment in Education and Skills Support for Summer Science Programs

Applicant Information

Name:	
Address:	
Phone:	Email:
Age:	

Summer Camp Opportunities

Skills Ontario Summer Camp	
Location:	Date:
Do you require Transportation:	

Discover Western Science Camp	
Location:	Date:
Do you require Transportation:	

Other Science Camp	
Location:	Date:
Details of camp:	
Do you require Transportation:	

Signature _____ Date _____

Applications received will be reviewed for approval. Program funding is limited.

Contact Information:
Kelly Lush, Township of Huron-Kinloss
klush@huronkinloss.com 519-395-3735

For Internal use only

Pre-approval date:	Receipt of payment received:
Submitted for payment date:	

Authorized Signature _____