

Oglebay Institute Financial Assistance Request Form
Adult Programming – Mountain Nature Camp



Full Name _____

Full Address _____

Email Address _____

Cell phone _____ Home phone _____

Are you an Oglebay Institute member? Yes No

Have you received financial assistance from Oglebay Institute before? Yes No

In consideration of your financial aid, applicant may be asked to pay a fair portion of the cost of the registration fee. Please indicate the fair portion you are able to contribute:

I can pay a total amount of \$_____.

Would you be able to assist in any of the following areas? Please circle tasks that you can help with.

(Set-up) (Cleaning) (Washing dishes) (Maintenance issues) (Programming) (Other duties as needed)

Please briefly explain what interests you in attending programming at Mountain Nature Camp and explain your need for financial assistance. Please add an additional page if more space is necessary.

Date _____

Signature _____ Print Name _____

All of the above information will remain confidential except to those people involved in the decision-making process. Please note that you should submit your request at least two weeks before the start of the program. All financial assistance is offered dependent on funding availability. Every effort will be made to give your application timely attention.

Please return your application to the attention of Betsy Phillips, Executive Assistant:
Oglebay Institute Administration Office, 1330 National Road, Wheeling, WV 26003