

The Lighthouse ArtCenter, a member-supported nonprofit charitable organization, provides visual and performing arts for the community through unique collections, engaging exhibitions and cultural programs, a dynamic School of Art and diverse outreach activities.

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Lighthouse ArtCenter Gallery

Gallery Square North 373 Tequesta Drive Tequesta, FL 33469 561-746-3101 www.LighthouseArts.org

Lighthouse ArtCenter School of Art

395 Seabrook Road Tequesta, FL 33469 561-748-8737

Children's Scholarship Application

Required Information

Please return this completed form along with either your tax return or eligibility letter for free or reduced-price school meals.

Student's Name			Date of application	
Parent/Guardian's Name(s)				
Street Address				
City, State, Zip Code				
Home Telephone Number	F	Parent/Guardia	n's Mobile Telephone Number	
Email Address(es)				
Student's Age Date of Birth (Month, Day, Year)				
Medical Conditions, Allergies, Spe	ecial Instructions:			
Name of School Currently Attend	ing:			
	ntary Inform			
Head of ☐ Single ☐ Married	Household/	Parents/G	iuardians	
Number of children und	erage 18 in H	ousenoia _		
List Ages			<u> </u>	
Combined Household In	icome:			
☐ Under \$8,000	□ \$8,000 - \$	15,000	□ \$15,000 - \$25,000	
□ \$25,000 - \$35,000	□ \$35,000-4	5,000	□ over \$45,000	
Please indicate the session scholarship. In the case of the a limit of one week per	of the Summer			

Selections of scholarships are made on the basis of financial need. It is the policy of the Lighthouse ArtCenter that there will be no discrimination because of race, color, religion, national origin, gender, sexual orientation, age, disability or military status. **All information will be kept confidential.**

How will this scholarship	benefit you or your child?	
Has the applicant taken o	classes or volunteered at the Lighthouse ArtCe	nter in the past? If so, when and to what capacity?
Send application to:	Lighthouse ArtCenter ATTN: Director of Education 395 Seabrook Road Tequesta, FL 33469	
For more information	n, please call the School of Art at (561)74 For Office Use On	18-8737 or email: Nancy@LighthouseArts.org. <u>lly</u>
Application received		
Session(s) requested		
Session awarded Scholarship Sponsor	Date Sponsor was ackno	wledged and how:
Request	☐ Denied Date entered onto Excel sprea	dsheet: by whom:
Comments		