

AMERICA'S CAR MUSEUM®

School Program Scholarship Application

To ensure all students have access to meaningful learning experiences at LeMay - America's Car Museum, scholarships may be available for discounts on student admission and workshop fees as well as reimbursements for transportation expenses. Applications are accepted on a rolling basis when scholarship funds are available. Scholarship funds can't be applied towards admission fees for additional chaperones (who exceed the required and complimentary 1:10 ratio), Speed Zone tickets, or souvenir kits. If you have any questions, please call 253.683.3978.

PLEASE SUBMIT COMPELTED APPLICATIONS (PAGES 1 AND 2) TO:

Mail: Email: Fax:
Education Department education@americascarmuseum.org. 253-779-8499
LeMay – America's Car Museum
2702 East D Street

Tacoma, WA 98421

Organization Information			
Tame of School/Organization:			
chool/Organization Address:			
ounty: District:			
hone #: Fax #:			
chool/Organization Website Address:			
ontact Person Full Name:			
ontact Person Title/Position:			
ontact Person Email:			
Grade(s) of Students Participating in Education Group Visit:			
nticipated Field Trip Date/Time:			
lease tell us why your group should be considered for scholarship funding. Feel free to attach nother page, if necessary.			

Request for Discount on Student Admission and Workshop Fees Please estimate the total cost of your desired group visit.		
Self-guided or guided tour:	OR	Self-guided or guided tour (\$6) + hands-
# of students: x \$6 = \$		on workshop (add-on \$3 fee): # of students: x \$9 = \$
		students: \$500 for up to 30 students
Fueling STEM Innovation (Force & Mot	ion): # of stud	dents: \$300 for up to 30 students
Fueling STEM Innovation (Plant Propuls	ion): # of stu	dents: \$150 for up to 30 students
Add optional virtual mini tour (\$50)		
Request for Reim	bursement o	f Transportation Expenses
Schools with 65% or more of its studer	its participatii	ng in a federal lunch program may be eligible for 00 for transportation expenses.
Round-trip Distance (in miles):	Estim	ated Cost of Transportation: \$
Name of Transportation Company, if applic	cable:	
school/organization name, date of your visit of before your visit).	, and approve	ate with the following information clearly marked: d scholarship amount (which you will be notified rincipal/Director:
Groups with 40-65% of its students par discount. Groups with 65% or mo	ticipating in a ore of its stude	n federal lunch program may receive up to a 50% ents participating in a federal lunch program 100% discount.
As of(to its students participating in a federal free or		
Principal/Director Signature:		_
Print Full Name:		
TO BE COMPLETED BY A	ACM FDUC	ATION DEPARTMENT.
Date when application was received:		
Scholarship Funding for Admission/Worksh Scholarship Funding for Transport Total An	ation Expense	(% discount) es: \$ d: \$
Decision was communicated?Notes:		ve Date of Field Trip?