



Clara Barton Camp Scholarship Application

For Type One Children Living in Braintree, MA or Surrounding Communities

Sponsored by: The Braintree Rotary Club

Purpose of the Scholarship:

This scholarship reflects Rotary's commitment to **Service Above Self** by supporting the health, confidence, and well-being of young people in our community. It provides financial assistance for one child living with **Type 1 diabetes** in Braintree or the surrounding area to attend **one week of Clara Barton/Camp Joslin Camp in Oxford, MA**. Between the ages 6-16.

By offering this scholarship, Rotary aims to remove financial barriers, promote youth empowerment, and ensure that every child has the opportunity to thrive—reflecting our values of **truth, fairness, goodwill, and benefit to all**.

Founded over 85 years ago, Clara Barton Camp is one of the nation's oldest and most respected camps exclusively for children with Type 1 diabetes. The program blends traditional summer camp fun—swimming, arts and crafts, sports, nature exploration, and cabin activities—with specialized diabetes education and 24/7 medical support.

Campers are surrounded by peers who understand the daily realities of diabetes, helping them build confidence, independence, and lifelong friendships. Under the guidance of trained counselors, nurses, and diabetes specialists, children learn practical skills such as carb counting, insulin management, problem-solving highs and lows, and navigating activities safely.

Most importantly, Clara Barton Camp creates a space where children feel understood, capable, and celebrated, allowing them to experience a week of freedom, growth, and belonging in a community designed just for them.

*Selection of scholarship recipients will be handled **entirely by Clara Barton Camp** through their established internal review process. Rotary will not participate in choosing recipients.

We're also excited to share that the camp is providing a **one-week campership for every first-time camper**, so new applicants will all have access to this opportunity!



SECTION 1 — APPLICANT INFORMATION

Child's Full Name: _____

Date of Birth: _____ Age: _____

Home Address: _____

Town/City: _____ ZIP: _____

School Currently Attending: _____

Does the child have a confirmed diagnosis of Type 1 diabetes?

Yes (required) Date of Diagnosis: _____

Has the child attended Clara Barton Camp before? Yes No

SECTION 2 — CAMP SESSION INFORMATION

Which Clara Barton Camp session are you applying for?

One-week overnight session Two-week overnight session

Session Dates (if known): _____

Session Dates Preferred: _____

CAMP JOSLIN (BOYS) & CLARA BARTON CAMP (GIRLS)

Overnight Camps: Sunday to Saturday

2-Week Sessions:

Session 1: July 12 – July 25, 2026

Session 2: July 26 – August 8, 2026

1-Week Sessions:

Session 1A: July 12 – July 18, 2026

Session 1B: July 19 – July 25, 2026

Session 2A: July 26 – August 1, 2026

Session 2B: August 2 – August 8, 2026



SECTION 3 — PERSONAL STATEMENT

(Parent/Guardian) *(Please answer in 150–300 words.)*

1. Tell us about your child and their journey with Type 1 diabetes. What challenges have they faced? What strengths have they shown?

2. Why would attending Clara Barton Camp be meaningful for your child?

Consider emotional growth, independence, diabetes management, confidence, or social connection.

3. How would this scholarship make a difference for your family? You may share any financial, medical, or personal circumstances you feel comfortable including.

SECTION 4 — CHILD'S STATEMENT (Optional but encouraged) *(A few sentences in the child's own words.)*

Why do you want to go to Clara Barton Camp? What are you excited to learn or experience?



SECTION 5 — HOUSEHOLD INFORMATION

Number of people in household: _____

Annual household income (optional but helpful for need-based review):
\$ _____

Are there any special circumstances affecting your family's financial situation?

SECTION 6 — CONSENT & SIGNATURE

I certify that the information provided in this application is accurate to the best of my knowledge. I understand that this scholarship covers **one week of camp tuition** and that I am responsible for any remaining fees not covered by the award.

Parent/Guardian Signature: _____

Date: _____

Submit your completed application directly to the Braintree Rotary Club by April 15th 2026.

Please email the finished form to: rotaryclubofbraintree@gmail.com

Learn more about Camp Clara Barton: [Clara Barton Camp](#)

If you have any questions please contact:

Tammie Frye

Braintree Rotary Club

Immediate Past President/T1D Mom

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