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| Applicant Information |
| Last Name |  | First |  | M.I. | Date |  |
| Street Address |  | Apartment/Unit # |  |
| City |  | State |  | ZIP |  |
| Phone |  | E-mail Address |  |
| Emergency contact |  | Relationship to Applicant  |  |
| Are you currently a student? | YES [ ]  | NO [ ]  | If yes, what university are you affiliated with? |
| Are you over the age of 21? | YES [ ]  | NO [ ]  |  |
| Do you have dietary restrictions? | YES [ ]  | NO [ ]  | If yes, explain |  |
| How would you describe your background knowledge in Philosophy?  |
| [ ]  No background (No Philosophy classes) | [ ]  Very little background (1-2 Philosophy classes)  | [ ]  Moderate background (3-6 Philosophy classes)  | [ ]  Firm Background (6-11 Philosophy classes)  | [ ]  Extensive background (12+ Philosophy classes)  |
| How would you describe your knowledge of Stoicism? |
| [ ]  No background  | [ ]  Very little background  | [ ]  Moderate background  | [ ]  Firm Background  | [ ]  Extensive background  |
| Please use the following space to let us know why you wish to attend Stoic Camp.  |
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| Disclaimer and Signature |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to acceptance, I understand that I must inform those at Stoic Camp that I will, or will not, be attending by Friday, April 26 and that by accepting admissions to Stoic Camp I agree to pay the admission fee. Deadline to pay this fee is Monday, April 29. I am aware that failure to do any of the aforementioned may result in a denial of attendance. |
| Signature |  | Date |  |