



## **CAMPING SERVICES 2021 FINANCIAL ASSISTANCE APPLICATION**

The Y strives to make our camps available to all, regardless of your economic background. While campers are expected to pay their fair share, financial support for camp is available. The amount we can offer is based on family size, gross income, extenuating circumstances and available funding. We are pleased to offer this financial support, which is made possible by the efforts and contributions of camp alumni, friends, and families through the Y's Reach Out For Youth and Families Program. We look forward to potentially serving your child at camp this summer!

The following information is necessary to determine the eligibility of your child for financial assistance. All information must be completed in full, with parent/guardian signature, to enable us to determine eligibility. All information received will be kept in strict confidence.

### **A complete financial assistance application includes a combination of the following:**

- Completed **financial assistance application form (required)**
- Completed **camp registration form (required)**
- Copy of your most recent (2020) **federal income tax return, OR**
- Recent **pay stub or verification of income, OR**
- Copy of EBT/SSI/Disability, proof of housing assistance

Financial assistance applications will be reviewed and applicants interviewed by members of the camping services staff. Applicants will be notified of their status within 5-7 business day following the interview. Please note, only first time campers are required to participate in an interview.

### **2021 Interview Dates & Times**

New camper families applying for financial assistance will participate in a virtual interview. If the date and time below does not compliment your schedule, private interviews can be scheduled upon request.

- Thursday, March 18, 2021 at 5:00 PM (virtual)
- Saturday, April 10, 2021 at 11:00 AM (virtual)

Upon receiving the award amount, should you choose to accept the scholarship, a \$100 deposit per week and a mandatory, non refundable \$25 COVID fee per week will be due within two weeks of notification or your child's spot will be forfeited.

### **Application Deadline: June 10, 2021**

#### **Return completed application/documents to:**

THE GRANITE YMCA  
Camping Services Branch  
30 Mechanic St.  
Manchester, NH 03101



# Financial Assistance Application

## CAMPER INFORMATION

Camper's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Camper Email: \_\_\_\_\_

Check One:  New Camper  Returning Camper Gender:  Male  Female

Parent/Guardian: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

(Cell Phone): \_\_\_\_\_ (Home Phone): \_\_\_\_\_ (Work Phone): \_\_\_\_\_

## HOUSEHOLD MEMBERS

List all children and adults (related or unrelated) who live in your household and share living expenses and/or meals. Do not include applicant. Please list ages next to those that are children.

_____	_____	_____
_____	_____	_____
_____	_____	_____

## HOUSEHOLD INCOME:

Annual current income (including public assistance, child support, alimony, etc) for all members of your household before deductions (taxes and social security). If you receive more than one check from any of these sources, please indicate the total monthly amount.

W-2 Employment: \_\_\_\_\_ EBT/Food Stamps: \_\_\_\_\_ SSI: \_\_\_\_\_

Child Support: \_\_\_\_\_ Subsidized Housing: \_\_\_\_\_ Disability: \_\_\_\_\_

What is your child's reason for wanting to go to camp? \_\_\_\_\_

\_\_\_\_\_

Has your child had any previous camp experience? What Camp? When? \_\_\_\_\_

\_\_\_\_\_

Please describe any physical or emotional difficulties your child may have \_\_\_\_\_

\_\_\_\_\_

What do you hope your child will gain from their camp experience? \_\_\_\_\_

\_\_\_\_\_

What can you afford to pay toward your child's camp fee? \_\_\_\_\_

\_\_\_\_\_

NOTE: This application does not serve as acceptance to the financial assistance program. It should be noted that should the applicant be admitted in the program, assistance will end the last day of the camp session that the camper has applied for. Should your son or daughter, for any reason, not adjust to camp life, you will be advised by the camp director and asked to pick him/her up from camp.

I hereby certify that the information provide is correct to the best of my knowledge.

Parent/Guardian Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_