

Summer 2009

Dear Parents,

Thank you for your interest in YMCA Summer resident camps.
Enclosed is the Financial Aid form you have requested.

It is important to note that camp scholarships are limited and are awarded on a first come, first served basis. Financial Aid is available for a one week session of summer camp per child, per summer.

Your entire Financial Aid packet will be returned to you until all items on the checklist below have been received as one packet by YMCA Camping Services. Your camper is not registered until a complete packet is received.

To receive financial assistance for the 2009 summer season, your financial aid packet requires the following information::

- One completed registration form per child**
Note: Please be sure that you have included your session choice.
- A deposit of \$50 per child to hold a spot for your camper**
Note: If your camper is not approved you will be refunded.
- The YMCA Financial Aid application** (*one per household*)
- Copies of your 2008 – 1040 tax forms or documentation of what income is coming into the household. (i.e. Current Social Security Benefit or DSHS Statements. Copies of your W2's alone are not enough to make an award.)**

Please be aware that you may not register for camp or apply for financial aid if you have an unpaid balance from a previous summer.

After you have assembled all of the necessary information, send it to:
YMCA Camping Services
ATTN: Financial Aid
909 Fourth Ave
Seattle, WA 98104

If you have any questions, feel free to call the Camping Services office at 206-382-5009, weekdays between 9:00 am and 5:00 pm.

Sincerely,

Financial Aid Services
YMCA Camping Services



CONFIDENTIAL FINANCIAL ASSISTANCE APPLICATION

Please complete the application below to help us evaluate your request

Your Name _____		Phone(____) _____
Address _____		
Street	City	ZIP Code
Employer _____		Phone(____) _____
Household Size: # of Adults _____ # of Children _____		
Name(s) of person(s) applying for financial aid:	Program applying for:	Entering grade:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
Is/are the above person(s) current YMCA member(s)? _____		
If so, which YMCA? _____		
Have you ever received financial assistance from the YMCA? _____		
When? _____ Where? _____		

<p>Please provide a copy of your last year's federal income tax form 1040 or other documentation.</p> <p>What was your family's total gross income for last year?</p> <p>\$ _____</p>	<p>List gross monthly income from all sources</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><i>APPLICANT</i></th> <th style="text-align: center;"><i>SPOUSE/OTHER</i></th> </tr> </thead> <tbody> <tr> <td>Wages/Salary</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td>Child Support</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td>Other*</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td>Total Income</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> </tbody> </table> <p>*List All Sources:</p> <p>_____</p> <p>_____</p> <p>_____</p>		<i>APPLICANT</i>	<i>SPOUSE/OTHER</i>	Wages/Salary	\$ _____	\$ _____	Child Support	\$ _____	\$ _____	Other*	\$ _____	\$ _____	Total Income	\$ _____	\$ _____
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Explain why you would like to be considered for financial assistance at the YMCA. Include any special circumstances.

I certify that the above information is true and complete to the best of my knowledge.

Signed: _____ Date: _____