

#### Lake County YMCA Day Camp

## FINANCIAL ASSISTANCE INSTRUCTIONS

Camping, like many Y programs, is about learning skills, developing character and making friends. But few environments are as special as camp, where kids become a community as they learn both how to be more independent and how to contribute to a group as they engage in physical, social and educational activities.

We believe that every child should have the opportunity to attend camp, but understand that sometimes families need help with the cost. Thanks to several generous individual contributions, the Y can help reduce camp fees for families in need.

We do our best to be fair in allocating funds. You can help by completing the FINANCIAL ASSISTANCE APPLICATION in full and providing accurate information as requested.

### **APPLICATION PROCESS** - SCHOLARSHIPS ARE ONLY AVAILABLE TO CURRENT Y MEMBERS.

- Complete attached Scholarship Application.
- Bring application with income verification to your local Lake County Y

West End in Willoughby 440.946.1160 Central in Painesville 440.352.3303 East End in Madison 440.428.5125

- Register for camp and make a deposit for each camper

This deposit will reserve a place for your camper(s). It will be applied to the camp fee.

-Central: Youth: \$25 per camper per week

-East End: \$25 per camper per week

-West End: Youth: \$25 per camper per week

- Stay connected to camp via www.lakecountyymca.org or each individual branch's camp Facebook page

#### IMPORTANT INFORMATION

**Deadlines** 

(Funds are limited. Priority will be given to applications received on or before the due date.)

May 2, 2025

Applicants will be notified once they have been chosen.



## Lake County Y Day Camp

# FINANCIAL ASSISTANCE APPLICATION

## RETURN THIS FORM WITH PROOF OF INCOME

Which camp location are you	applying	for assist	ance (cir	cle one)? Centr	al East	West			
Parent/Guardian Last Name				First Name					
Address				City	Zip				
Home Phone				Work	Phone				
Number of adults in housel	nold		_ Numb	per of children in h	ousehold				
Requesting assistance for:		Camper	Last Na	ame	First Name	Age 		Birthdate	
Due to limited funds availa 1		-			amp at scholarship price. F		-	-	
Income—Are you, your spo		children		ng		_			
ADC?	YES	NO	\$	Per Month	Food Stamps?	YES	NO	\$	Per Month
Social Security Benefits?	YES	NO	\$	Per Month	Veteran's Benefits?	YES	NO	\$	Per Month
Child Support?	YES	NO	\$	Per Month	Spousal Support?	YES	NO	\$	Per Month
Unemployment Benefits?	YES	NO	\$	Per Month					
Employment—									
Are you employed?	YES	NO	\$	Per Month	Spouse?	YES	NO	\$	Per Month
Any of the children?	YES	NO	\$	Per Month					
Why does your child wish t					ACCOMPANY THIS APPLIC				
Has your child attended car	mp befo	ore? Y o	r N If	yes, when?					
Has you child received cam	p assist	ance bef	ore? Y	or N If yes, when	?				
Most scholarships do not c	over the	e full cam	p fee.	What amount are	you willing to contribute?				
Why do you need this assis	tance?								
What other YMCA program	ıs has y	our child	been in	volved in?					
In accordance with YMCA your 1040 from last year).						rificatio	n (Inclu	de the fi	rst page of
I understand tha I understand tha I understand tha I understand tha	t additi t I am r	onal cam not guara	p exper nteed fi	nses are my respor inancial assitance f	nsibility.	al assista	nce.		
I, hereby, certify that all the Signature of parent/legal g	e inforn uardian	nation pr	ovided i	is true to the best	of my knowledge. Date				