



YMCA CAMP JACKSON

RESIDENT CAMP & RETREATS

FINANCIAL ASSISTANCE APPLICATION PROCESS YMCA SUMMER CAMP PROGRAMS

Please follow the instructions below and return all documentation to the address at the bottom of this form. Submit these documents as soon as possible for the best chance of receiving assistance.

Please note that due to an increasing demand for financial assistance to support families to attend Camp Jackson, this year's financial assistance is based on the cost of our YMCA Member rate of \$592 or Non-Member rate of \$695. Camp Jackson limits your assistance award to one 1-week session only, and a \$100 deposit is required regardless of assistance awarded.

Please understand that funds are limited, based on donations received through the YMCA Annual Support Campaign, and are granted on a first-come, first-serve basis. Also, keep in mind that camp fills quickly!

One financial assistance form must be completed for each child.

To apply for financial assistance:

- Complete the financial assistance form below and attach all back-up documentation showing evidence of your income. This includes TWO (2) of the following:
 - Most recent taxes
 - Current pay stubs
 - Any food or housing assistance
 - Other proof of income or assistance
- **Please register online to secure your camper(s) spot in camp. The \$100 deposit is non-refundable and required.**
- Return these items to the address below (**email preferred: jbaxter@puebloymca.org**)
- Processing may take up to two weeks. Please ensure you complete the contact information clearly. (e.g. email, phone)
- YMCA Camp Jackson will send you an email verifying whether or not your application has been approved, and the amount of assistance awarded. Please check your spam email.
- Please follow the instructions on this letter and note that a camp space cannot be confirmed until we receive your acceptance. Your camper(s) spot in camp may be forfeited if we do not hear back from you within two weeks to accept your award.

Many people need financial assistance at some point in their lives. You must reapply every year. The YMCA is a human services, charity organization dedicated to building strong kids, families, and communities through programs that develop spirit, mind, and body. We invite you to join us as we provide opportunities for everyone to exercise the values of caring, honesty, respect, and responsibility.

YMCA CAMP JACKSON Financial Assistance Application

Please mail or email this completed form and camp paperwork to:

YMCA Camp Jackson
Attn: Jordan Baxter
3200 E Spaulding Ave
Pueblo, CO 81008
jbaxter@puebloymca.org

Questions?

Call us at 719-543-5151 or email jbaxter@puebloymca.org

Please complete for EACH child. Thank you!

The YMCA will strive to assist any individual/family who wants to participate in a program, but cannot afford the fees. Anyone requesting financial assistance for a YMCA program must complete this form and attach proof of income to be reviewed. All applications will be reviewed and you will be notified by mail if you qualify for assistance.

Are you a current member of the YMCA of Pueblo?

Yes No

Child's Name Age

Program Requested: Base Camp Horsemasters Adventure Camp Leaders in Training (LIT)
 Counselors in Training (CIT)

Address City State Zip

Parent/Legal Guardian's Name (1) Marital Status: Single Married Separated Divorced
 Widowed

Employer Address Work #

Salary Hourly Wage Hours per week

Cell # Email

Parent/Legal Guardian's Name (2) Marital Status: Single Married Separated Divorced
 Widowed

Employer Address Work #

Salary Hourly Wage Hours per week

Cell # Email

YMCA CAMP JACKSON Financial Assistance Application

Income per month

Salary/Wage(s)

Public Assistance

Child Support

Alimony

Other (explain)

Expenses per month

Rent/Mortgage

Food

Utilities

Transportation

Child Care

Medical

Other

Total Expenses

Total Income

Amount I can pay

Participants are expected to pay their fair share. The YMCA will assist any individual/family who wants to participate, but cannot afford the fee.

Please list any special circumstances which you feel should be taken into consideration during the review of this application:

Total number of people in the household _____

Please list the names and ages of any other children living with you:

Child's Name

Age

Child's Name

Age

Child's Name

Age

Application Attestation: I certify that the information I have provided within this application is true and correct to the best of my knowledge. I give consent to the YMCA to verify any or all of the information on this application.

Parent/Legal Guardian's Name

Parent/Legal Guardian's Name

Date

All sections must be complete and proof of income in the form of the most recent tax return and one month's pay check stubs and camp registration form must be attached in order to be reviewed.

Office Use Only: Date Recorded: _____ Amount Awarded: _____ Amount Due: _____

Approved By: _____ Date Completed: _____