



The following steps will guide you through the application process. Unfortunately, we cannot process incomplete applications. Incomplete applications or applications received without proper documentation will be returned to you for completion. This will hold up your application process and as a result, your child may not get their 1st choice session. If you need assistance completing this application, please contact our office at 860-526-9529.

### OPEN DOORS FINANCIAL ASSISTANCE APPLICATION - INSTRUCTIONS

**Step 1** - Complete the attached Summer Camp Registration form for each child indicating which session/s you are applying for. Be sure to include a 1st and 2nd choice. In order to provide a camp experience for as many children as possible, we are only able to offer assistance for up to 2 weeks of Resident Camp or 4 weeks of Day Camp per child.

**Step 2** - Fill out both sides of the Open Doors Financial Assistance application COMPLETELY. Please be thorough and do not leave any information out. As we are not able to process incomplete applications, the application will be returned to you for completion. This will hold up the process and your child may not get the session of their choice as a result.

**Step 3** - refer to the check list below and the list of Required Documents on page 2 of the Open Doors Financial Assistance application. Be sure to include ALL required documentation. If you do not have a copy of your most current tax return, please contact your accountant or the IRS and request a copy. If you do not have a copy of any of the other required documentation, contact the appropriate agency to obtain the proper documentation needed.

**Step 4** - Feel free to include a separate sheet listing any unusual circumstances you may have that would be important to know while considering your application.

**Step 5** - Check all applicable boxes below indicating that you have included these required forms with your application.

**Step 6** - Mail OR fax your completed application with ALL required documentation AND a deposit of \$100 per child. If you are unable to come up with the full deposit at this time, please contact the office to make alternate arrangements.

### Check List for All Required Documentation

**Federal Tax Return** - attach pages 1 & 2 of the most current year tax return (forms 1040, 1040-A, etc.)

**Pay Check Stubs** - include copies of the 2 most recent pay stubs from each employer for ALL adults living in household. If you are receiving unemployment benefits, please include a copy of your unemployment benefits statement

**Child Support/Alimony** - all applicants who are legally separated or divorced must provide a copy of the divorce decree or other legal document that outlines the care of children and alimony or child support

**Agency Subsidy** - attach a copy of your letter of benefits from appropriate agency outlining monthly benefits received for SSI, DCF, AFDC, SSD, etc. for all household members receiving benefits

**Food Stamps/Rental Assistance/Cash Assistance** - include a letter of benefits from agency outlining all monthly benefits being received



# Camp Hazen YMCA

*Open Doors Financial Assistance Application*

| <b>FAMILY INFORMATION</b>   |      | <i>applies to Parents/Guardians with whom the camper resides</i>           |                            |
|---|------|--|----------------------------|
| Street Address:   |      | <b>PARENT 1</b>  |                            |
| City:   |      | <b>PARENT 2</b>  |                            |
| State:  | Zip: | Last Name:   | Last Name:                 |
| <b>FAMILY STATUS</b>  |      | First Name:  | First Name:                |
| Has there been a divorce/separation in your family?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                       |      | Home Phone:  | Home Phone:                |
| If yes, who has custody?<br>_____   |      | Work Phone:  | Work Phone:                |
| Who claims child/ren on tax return?<br>_____  |      | Cell Phone:  | Cell Phone:                |
| Is non-custodial parent responsible/able to pay their share of camp fees?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |      | email:   | email:                     |
| If no, please explain.<br>_____<br>_____  |      | Occupation/<br>Employer:   | Occupation/<br>Employer:   |
| <b>CAMPER 1 INFORMATION</b>   |      |  |                            |
| <b>Non-Custodial Parent:</b>  |      | Last Name:   | First Name:                |
| Last Name:  |      | <input type="checkbox"/> Male <input type="checkbox"/> Female              |                            |
| First Name:   |      | Birthdate:   | Grade Sept 2011:           |
| Home Phone:   |      | Returning Camper: <input type="checkbox"/> Yes <input type="checkbox"/> No |                            |
| Work Phone:   |      | Camp & Session 1st Choice:   | Camp & Session 2nd Choice: |
| Cell Phone:   |      | <b>CAMPER 2 INFORMATION</b>  |                            |
| Street Address:   |      | Last Name:   | First Name:                |
| City:   |      | <input type="checkbox"/> Male <input type="checkbox"/> Female              |                            |
| State:  | Zip: | Birthdate:   | Grade Sept 2011:           |
| Occupation/<br>Employer:  |      | Returning Camper: <input type="checkbox"/> Yes <input type="checkbox"/> No |                            |
|   |      | Camp & Session 1st Choice:   | Camp & Session 2nd Choice: |
| <b>CAMPER 3 INFORMATION</b>   |      |  |                            |
|   |      | Last Name:   | First Name:                |
|   |      | <input type="checkbox"/> Male <input type="checkbox"/> Female              |                            |
|   |      | Birthdate:   | Grade Sept 2011:           |
|   |      | Returning Camper: <input type="checkbox"/> Yes <input type="checkbox"/> No |                            |
|   |      | Camp & Session 1st Choice:   | Camp & Session 2nd Choice: |

*Open Doors Financial Assistance Application - page 2*

Camp Hazen YMCA is a nonprofit, cause-driven organization committed to helping youth develop valuable life skills through camping experiences that build healthy bodies, open minds and awakened spirits. Everyone is welcome - people of all ages, backgrounds, abilities and incomes. All information will be kept confidential. All Camp Hazen YMCA program participants receive the same benefits, regardless of whether or not they are receiving assistance.

**MONTHLY INCOME FROM ALL ADULTS IN HOUSEHOLD**

|   | <b>PARENT 1</b> | <b>PARENT 2</b> |
|---|-----------------|-----------------|
| Earnings (salary, wages, commissions, etc)  | \$ _____        | \$ _____        |
| Child Support   | \$ _____        | \$ _____        |
| Alimony   | \$ _____        | \$ _____        |
| Agency Subsidy (SSI, AFDC, SSD, DCF, etc)   | \$ _____        | \$ _____        |
| Food Stamps, Rent or Cash Assistance  | \$ _____        | \$ _____        |
| Other Income (rental property, investments, etc)                                  | \$ _____        | \$ _____        |
| <b>Totals</b>   | \$ _____        | \$ _____        |
| Please list the total number of people in household living on above income: _____ |                 |                 |
| <b>OF THE FULL PROGRAM FEE, I AM ABLE TO PAY:</b> \$ _____                        |                 |                 |
| Special Circumstances:  |                 |                 |

I certify that the above information is true and complete to the best of my knowledge. I agree to inform Camp Hazen YMCA immediately of any change in my income or family size. I understand that false or incomplete information could jeopardize any opportunity for financial assistance. I also understand that a registration is not complete until the terms of a financial aid offer have been accepted and a program deposit received.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date

**Required Documentation**

Documentation is required for **each** type of income listed on the application. Incomplete applications will be returned to you for completion.

**Tax Return** - include copy of first two pages of your income tax return (1040, 1040A, etc)

**Paycheck Stubs** - include copies of 2 most recent pay stubs for each employer for ALL adults in household

**Child Support/Alimony** - parents who are legally separated or divorce must include documentation outlining each parent's financial responsibility

**Agency Subsidy** - for families receiving subsidy, include documentation of benefits from each agency (SSI, DCF, AFDC, SSD, etc)

**Food Stamps/Assistance** - for families receiving subsidy, include documentation of benefits from each agency

**Please complete both sides and mail with attachments to: Camp Hazen YMCA,  
204 West Main St, Chester, CT 06412 OR fax to: 860-526-95**