

Friends of Camp Celo Campership Application

INSTRUCTIONS AND GUIDELINES

1. Before applying for a campership, please apply for your child to attend Camp Celo (even if your camp application is contingent on campership funding). Since spaces in camp sessions often fill up quickly, and the tuition for junior camp sessions varies in cost, we cannot consider your campership application until your child has secured a space in a specific camp session.
2. Please keep in mind that we have a finite amount of campership money available, and that campership are intended for the most needy families. The primary responsibility for financing a child's summer camp experience rests with the family, so we expect families to research all available outside resources, including extended family, to obtain funding for camp tuition before applying for campership assistance from Friends of Camp Celo. Accordingly, when considering whether to apply for a campership, and what amount to request in campership assistance, please ask yourself, will the campership that I am requesting make the difference between my child being able to attend camp or not?
3. To enable our committee to consider each campership application fairly and equitably, please provide an answer for each question on the campership application. We can only consider complete applications. If any questions are left unanswered, we may need to defer considering your application until supplemental information is provided.

DEADLINES AND LATE APPLICATIONS

Campership Applications are due by March 1st.

Late applications: Applications received after the deadline above will still be considered, but please keep in mind that there is a finite amount of money in our campership fund. Applications received after March 1st may be reviewed in batches on a rolling basis, and thus you may not hear a final decision on a late application until late May or early June.

CONTACT INFORMATION

Please email your campership application to: Camperships@friendsofcampcelo.org

If email is not an option for you, you can submit your application to us by US mail to:

Friends of Camp Celo Camperships
775 Hannah Branch Road
Burnsville, NC 28714

Please submit your application for Camp Celo prior to or when applying for campership funds. Campership applications are reviewed and approved by the Friends of Camp Celo Campership Committee, which is a separate non-profit organization and not a part of Camp Celo. Since spaces in camp sessions often fill up quickly, and the tuition for junior camp sessions varies in cost, we cannot consider your campership application until your child has secured a space in a specific camp session.

Your privacy is important to us, and thus we will try to ensure that the information you supply will be kept confidential and that only people directly concerned with granting financial aid will see it. If you have any questions or concerns about privacy, please contact us at Camperships@friendsofcampcelo.org



Friends of Camp Celo Campership Application

Camper Name(s): _____

Registered for Session: _____

Birth date: _____

Age as of June 1st: _____ Will have finished _____ grade by time of Camp

Gender: _____

Previous Camp Celo experience and years attended:

Have you received a scholarship in the past? Yes No If so, for how much? _____

Have older siblings/relatives attended Camp Celo? _____

Preferred Email contact: _____

Preferred Address (please include state and zip code):

Is the camper a relative of a board member? Yes No

If so what is the relationship? _____

(Relatives will receive the same consideration as other applicants however this information is helpful in avoiding conflicts of interest among committee members.)

In order to assure fair and equitable consideration, please provide an answer for each of the following questions as we can only consider a complete application. If any question is not answered, we may ask for additional information and/or you may be contacted by a member of the committee.

Adults Financially Responsible for Child

Adult A Name: _____

Relationship to child: _____

Address (if different than above, please include state and zip code):

Email: _____

Employer: _____ Position: _____

If unemployed, most recent position, employer, and dates of employment:

Adult B Name: _____

Relationship to child: _____

Address (if different than above, please include state and zip code):

Email: _____

Employer: _____ Position: _____

If unemployed, most recent position, employer, and dates of employment:

Adult C Name: _____

Relationship to child: _____

Address (if different than above, please include state and zip code):

Email: _____

Employer: _____ Position: _____

If unemployed, most recent position, employer, and dates of employment:

PLEASE PROVIDE THE FOLLOWING FINANCIAL INFORMATION

Please supply as much information as possible in order to provide a complete and accurate picture of your family's financial situation, including other adults who contribute to the financial well-being of the applicant.

Adult A Name: _____

Yearly Gross Employment Income pre-tax: _____

Yearly Gross Income from Non-Employment Sources	
Dividends/Interest/Annuities	
Rental income	
Yearly Subsidy Income (housing, food stamps, other)	
Other sources of income	
Total	

Other owned assets	Value
Stocks/Bonds/Mutual Funds/Cash	
Retirement	
Cash Value of Insurance	
Buildings and Land	
Vehicles	
Boats/RV's, etc...	
Other assets	
Total	

Vehicles Make: _____ Model: _____ Year: _____

Make: _____ Model: _____ Year: _____

Expenses	Per Month	Per Year
Mortgage/Rent		
Other Loans		
Medical Expenses other than routine care (include orthodontics)		
Dependent School Tuition		
Adult Tuition		
Other Expenses		
Total		

Home is: owned rented

If adult is a student, please name school and number of credit hours this year:

Retirement savings: _____

(note that this is not considered part of your income, but it does give us a better picture of your financial circumstances)

Adult B (if applicable) Name: _____

Yearly Gross Employment Income pre-tax: _____

Yearly Gross Income from Non-Employment Sources		Other owned assets	Value
Dividends/Interest/Annuities		Stocks/Bonds/Mutual Funds/Cash	
Rental income		Retirement	
Yearly Subsidy Income (housing, food stamps, other)		Cash Value of Insurance	
Other sources of income		Buildings and Land	
		Vehicles	
		Boats/RV's, etc...	
		Other assets	
Total		Total	

Vehicles Make: _____ Model: _____ Year: _____

Make: _____ Model: _____ Year: _____

Expenses	Per Month	Per Year	Notes
Mortgage/Rent			Home is: <input type="radio"/> owned <input type="radio"/> rented
Other Loans			
Medical Expenses other than routine care (include orthodontics)			
Dependent School Tuition			
Adult Tuition			If adult is a student, please name school and number of credit hours this year:
Other Expenses			
Total			

Adult C (if applicable): Please list income and expenses below or use separate sheet:

Does your camper have assets of their own such as a trust, educational fund, or other assets? What is the value of those assets?

Please use this space to explain any special circumstances related to the assets or expenses you listed above. If you listed assets or expenses under "Other", please describe them here:

Will anyone else be helping to pay for your camper's tuition (extended family, friends, church, charitable organizations)? If so, how much will they contribute?

Family	
Friends	
Charitable organizations	
Camper*	
Total:	

**Many past campers helped pay for their own tuition through savings or doing work for family, friends and neighbors. Is this something you have considered?*

Please explain any other relevant financial or legal arrangements among the financially responsible adults.

Dependents of financially responsible adults (include camper):

Are any dependents only the responsibility of one of the adults? Please explain:

In the space below (or on a separate sheet if necessary), we would like you to provide us with any other information you would like us to consider regarding why you feel that attending Camp Celo would be beneficial to your child:

	1 Week	2 Week	3 Week
If I/We really stretch, I/we can pay:			
Therefore, my/our Campership request is for:			
In order to make the total tuition of:			

Please keep in mind that we have a finite amount of money available, and scholarships are intended for the most needy families. When considering an amount for your request, please ask yourself, what amount will make the difference between my child being able to attend camp or not?

Some families discover camp when it is too late to do much financial planning to make it possible for their children to attend. We are thrilled to be able to help kids get to camp and want to make it possible to get as many kids to camp as we can. However our funds are limited, so we ask that you think about what you can do to increase the amount you put towards your child's camp tuition in future years.

Please make every effort to submit a complete application that provides all of the information requested. Submitting an incomplete application may result in the scholarship committee deciding to defer your application until supplemental information is provided.

Applications are due March 1st.

EMAIL: Camperships@friendsofcampcelo.org

Applications received after this date will still be considered but please keep in mind that applications received after March 1st may be batched with rolling decisions after this date, consequently you may not hear a final decision until late May or early June if your application is submitted after the March 1st deadline.

Date: _____ Parent Signature: _____