



**South Shore YMCA  
Camp Burgess & Hayward**

**Financial Assistance Application**



Today's Date: \_\_\_\_\_

Camper's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**IMPORTANT**

Please attach the following to your application:

- Most recent copy of your most recent **federal income tax form** (both sides)
- Completed **registration form**
- Recent **pay stub** or **verification of income**
- \$50 Deposit**

**Please Note: We cannot process your application unless we have ALL the supporting documents above ↑**

Please list all people living in your household, whether related or not.

Name	Current Age	Name of Employer/School

I am applying for financial assistance for the following program: \_\_\_\_\_

Have you ever applied for financial assistance before at Camp Burgess & Hayward?  Yes  No

How much have you received previously per child? 2009: \$ \_\_\_\_\_ 2008: \$ \_\_\_\_\_ 2007: \$ \_\_\_\_\_

Do you currently receive financial assistance from a YMCA?  Yes  No

If yes what % (or amount) and which YMCA? \_\_\_\_\_

**Financial Information**

*Please itemize your monthly, **Pre-tax** income and expenses:*

Monthly <b>Household</b> Income		Monthly <b>Household</b> Expenses	
Gross wages/salary (household)		Rent/Mortgage	
Child Support		Food	
Social security		Medical	
Food Stamps		Utilities	
Retirement Income (Non-social security)		Car	
Other Income (please explain)		Tuition	
<b>Total Monthly Income</b>		Other (please explain)	
		<b>Total Monthly Expenses</b>	

How much can you afford to pay towards this program for each child? \$ \_\_\_\_\_

**Please complete the other side**

