



2011 Confidential Scholarship Application



1. Complete a 2011 Summer Camp Registration, either online or hard copy, and **include at least a \$50 deposit.**
We will refund your deposit if a scholarship is not awarded.
2. Complete this Scholarship Application. Include a copy of the first two pages of your most recent Federal Income Tax Form 1040 as income verification. **We cannot process your application until we receive this form.**
3. Mail or fax your information to 1872 Pilot Knob Rd, Kattskill Bay, NY 12844; 518-656-9362
A \$25 processing fee is charged for cancellations after February 1.

Camper's name _____ Male Female

Home address _____ State _____ Zip _____

Have you already registered for 2011? _____ Session requested? _____ 2nd choice _____ 3rd choice _____

Race/ethnicity: **Circle:** White Black/AfAm Asian/Pacific Isles Hispanic Other _____

Family status: **Circle:** Single parent One income Two incomes Foster Guardian Other _____

Mother's name _____ Father's name _____

Place of employment _____ Place of employment _____

Contact phone _____ Email _____

Family Dependents (Children and others living at home):

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for request (explain home and family situation and child's individual needs):

Referred by (agency or individual): _____

The following information must be provided in order for us to process your application:

Approximate total annual family income in 2010? \$_____.

Chingachgook: Our family is able to pay \$ _____ of the \$1,560 tuition for the two-week session or \$915 for the one-week session for which I have applied.

WaWa Segowea: Our family is able to pay \$ _____ of the \$495 tuition for the one-week session for which I have applied.

If we are unable to provide scholarship assistance, would you still plan to attend camp? _____

To the best of my knowledge the above statements are true.

Parent/Guardian Signature _____

Date _____

<i>For office use</i>			
Deposit received	\$ _____	Session approved	_____
YMCA scholarship	\$ _____	Date processed	_____
Family will pay	\$ _____	Referral agency will pay	\$ _____