



Easter Seals Campership Application 2016

If requesting a campership, this form and tax documents must be completed and returned in order to be considered for a campership.



CAMPERSHIP POLICY: If you are experiencing financial difficulty, please fill out this Campership Application for financial assistance. There are a limited amount of camperships. Campers will be considered based on submission of required documents and using a formula to match the need and level of campership. In nearly all cases, some payment will be required for your camper. This payment may be paid in installments, but **must be completed 8 weeks prior to camp unless special arrangements have been made with the TPOC Executive Director.**

Program Name applied for: _____ Program Date: _____

Applicant's Name: _____ Age: _____

Address: _____ Phone: _____

Parent's/Family Member's Name: _____ Home Phone: _____

Parent's/Family Member's Employer: _____ Work Phone: _____

Public Aid Medical Card #: _____ County: _____



Please attach photo copy of both sides of Medical card

⇒ Applicant's and Parent/Guardian's Current HOUSEHOLD Weekly Income: \$ _____

⇒ Current HOUSEHOLD Annual Gross Income: \$ _____

⇒ How many people does this income support? Adults _____ Children _____

⇒ Is applicant currently enrolled in a public school and qualify for the free and reduced school lunch program? YES or NO



Please attain and attach an official letter from the public school stating the child is enrolled for the current school year and qualifies for the Federal Free/Reduced Lunch Program.

Amount to spread out on a payment plan: \$ _____ Dates: from _____ to _____

All payments and fees must be completed 8 weeks prior to the start of camp unless special arrangements have been made with the TPOC Executive Director.

The Easter Seals Campership program has been established to help as many as possible who are experiencing financial difficulties to participate in Timber Pointe Outdoor Center camping and outdoor recreation programs. **However, campership resources are limited and we ask your help in making available funds go as far as possible. Please consider churches, local service clubs, family members, etc. as additional sources of assistance.**

In the spaces below, please provide a contact name, address and phone number of a caseworker, pastor, school official, etc. who can serve as a contact person to verify eligibility.

Contact Person: _____ Phone #: _____

Address: _____

Title: _____



All applications for campership assistance must include a copy of last year's federal income tax return in order to document household income.

Each camper will be expected to share the cost of the program fees to some extent. Please consider how much of the fee you can afford and understand that special circumstances warrant special attention. If this is the case, please contact Timber Pointe Outdoor Center. 309-365-8021

Return this form to: Timber Pointe Outdoor Center, 20 Timber Pointe Lane, Hudson, IL 61748