

DWSF CAMPERSHIP APPLICATION

Financial Aid Form

(One needed for each camper applicant)

Camper's Name _____ Date of Birth _____

Boy___ Girl___

Mother/Guardian's Name _____ Home Phone _____

Work Phone _____

Father's Name _____ Home Phone _____

Camper lives with () Mother/Guardian () Father () both Other _____

Resident

Address _____

Applying for 3rd Period (7/3-17)___ 4th Period (7/18-31)___ 5th Period (7/31-8/14)___

Total Family Annual Income \$_____ (including child support) A copy of the first page of last year's IRS 1040 showing adjusted gross income should be enclosed with this form.

In addition to the \$100 minimum registration fee I can afford to pay \$_____ toward the two week's tuition cost of \$1035. Therefore, I request assistance in the amount of \$_____.

Brief Description of Camper (include special interests, personal characteristics and ability to get along with others). Please make this "word picture of the camper" different from the information requested on the letters of recommendation:

Signature _____ Date _____