



mountain day camp Scholarship Application

Dear Parent/Guardian,

Thank you for your interest in Mountain Day Camp's Camperships. This program, offered in partnership with the American Camp Association, is designed to offer opportunities to campers who wouldn't otherwise be able to attend Mountain Day Camp.

We offer limited, partial, and full camperships, based on funding and numbers of spaces available in each session. Camperships awarded are based on documented financial need.

Enclosed is a Campership Application. Steps to apply for a Campership are:

1. **Register online:** Go to <http://my.mountaindaycamp.com/>, and pay a \$50 deposit per session towards your camp fees to reserve a space in the session(s) you desire. This is applied to your portion of the balance not covered by Campership allocation.

If you prefer, you may also mail a check in with your application instead and we will not deposit it until campership logistics are confirmed with your family.

2. **Complete the Campership Application.** Review prior to sending to ensure no information has been missed. Incomplete forms will be returned and may not be received back in time for consideration. Forms can be mailed to the address at the bottom of this page, e-mailed to info@mountaindaycamp.com.

Due to the limited number of camperships available, it is possible that a family with multiple children may only be awarded a campership for one child or one session.

3. **Mail, or E-Mail (scanned copy) Your Application:** to Mountain Day Camp *with a copy of your most recent pay stub or tax return.*

- E-Mail a scanned copy to info@mountaindaycamp.com
- Mail to PO Box 3666 Boulder, CO 80307

4. **Pay Your Balance:** All balances must be paid prior to the start of the camp session, or a payment plan can also be set up.

Our Campership Committee reviews all applications. You will be notified by e-mail (within approximately 3 weeks) whether your request has been awarded. *Note: we may have more applicants than we can accommodate.*

If your request is awarded, we will send you a link to complete online registration forms and you will be able to pay your remaining balance either online or via check.

If you have any questions about our campership program, please contact Betsy at (720) 249-2997. Thank you.

Sincerely,

Mountain Day Camp



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Please complete. Attach additional sheets if necessary.
This campership application is for:

 List names of all campers for which this application is being submitted.

 Custodial Parent Second Parent

 Street Address City State Zip

Child custody details (if necessary, attach additional pages): _____

 Total Number of persons in Household: _____

List all dependent children living in household:

Name: _____ Age: _____
 Name: _____ Age: _____
 Name: _____ Age: _____
 Name: _____ Age: _____

List all other persons living in household (ex: adult children, grandparents, etc.):

Name: _____ Age: _____
 Name: _____ Age: _____
 Name: _____ Age: _____

Family Income:

Mountain Day Camp awards camperships based upon family financial need. We request that you provide us with information about your family's annual income. We keep this information confidential at all times.

Complete the table below by listing the combined annual income for the family. Includes all sources of income: alimony, child support, social security disability payments and government aid. **Attach a copy of the first two pages of your 1040 federal tax return, or your most recent pay stubs (for all wage earners) to verify this information.**

| Name of Wage Earner | Gross Annual Income |
|-----------------------------------|---------------------|
| | |
| | |
| | |
| Total Gross Annual Income: | |

Has your camper attended camp in the past? Where/when? _____



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Describe why your child is in need of this campership, and how an experience at Mountain Day Camp will benefit your child:

Do any of the following apply to your camper?

- My camper has some sort of special need or learning disability or has an IEP at school.
- My camper has been adopted through the foster system, or is a foster child.
- My family has someone with a special need or extraordinary medical expense.

Please explain any boxes checked above:

Include any particular hardships or expenses affecting your family. Include special circumstances other than financial as well:

2010 Session Request –Which session are you requesting (leave blank if you’ve paid your deposit online. _____)

NOTE: Many sessions sold out in 2009. Spaces are not reserved until the deposit has been received.

Parent Authorization

This Campership Application is correct to the best of my knowledge. I hereby agree to provide Mountain Day Camp with additional financial documentation upon request to verify the information I have provided on this form. I have submitted the \$50/session deposit, and it will be deducted from my balance. If selected for a campership, I agree to pay the remaining balance by the start of the camp session. I understand that many applicants apply for this program and if I am not awarded a space for 2010, my registration deposits will be returned and I may apply again next year.

Signature of custodial parent/guardian

Printed Name

Date

Parent Phone

Parent E-mail