

Day Camp Campership Application - 2018

Confidential Financial Information

Please note that all information on this sheet will be held in the strictest confidence.

Family Name:

Guardian 1 Name

Occupation

Employer's Name and Address:

Guardian 2 Name

Occupation

Employer's Name and Address:

All sources of Family Income:

- Below \$15,000
- \$15,001- \$25,000
- \$25,001- \$40,000
- \$40,001- \$60,000
- \$60,001 - \$75,000
- \$75,000 - \$100,000
- \$100,000 - \$150,000
- \$150,000+

Do you have additional resources not reflected on the IRS Form 1040 or 1040A? (ie. Parsonage, family assistance, other stipends, etc.)

No Yes. If yes, how much? _____

A copy of your page 1 & 2 from your 2017 IRS Form 1040 or 1040A must be submitted in order to be considered. See Instructions.

It is important to provide any additional information you would like us to consider which may not be reflected in your financials. Use additional space if needed. Please provide evidence of the circumstances you wish considered:

By signing this agreement with your electronic signature, you declare that all information submitted is accurate and verifiable.

Guardian 1 Signature: _____ Date: _____

Guardian 2 Signature: _____ Date: _____