



CAMPERSHIP APPLICATION FORM

The Campership Program receives funds annually from local community members. These donations are used to off-set the costs of sending children to Camp that may not otherwise have the opportunity.

Criteria:

Any family is able to apply for the Campership program. We strive to choose kids that would never get to go or experience Camp Alexo. Priority is given to those youth and family who utilize the Youth HQ Programs and then Children from Central Alberta. Household Income; # in Household; Program Membership and # of Siblings play key roles in the selection process.

Applicant must complete this form and return it by E-mail to Campership@youthhq.ca with proof of Income as soon as possible. Once funds are used up, we are unable to accept anymore applications.

All information collected is maintained in accordance with the Personal Information Protection Act (PIPA)

* We require the requested information to register your child in the appropriate camp session(s). Youth HQ is obligated to follow rules set forth in this legislation.

HOUSEHOLD INFORMATION

Parent/Guardian Surname		Parent/Guardian First Name		Email	
Street Address			City	Postal Code	Preferred Phone Number
Family Status: <input type="checkbox"/> 2 Parent Family <input type="checkbox"/> Single Parent <input type="checkbox"/> Blended <input type="checkbox"/> Foster Care <input type="checkbox"/> Kinship Care <input type="checkbox"/> Group Care <input type="checkbox"/> CFS is Guardian					

FINANCIAL/OTHER INFORMATION

Total Family Monthly Income	Do you receive any other financial assistance?	Total ADULTS in Household	Total DEPENDENT children
Are your children involved in any Youth HQ programs? <input type="checkbox"/> Past Camper <input type="checkbox"/> Boys & Girls Club <input type="checkbox"/> Big Brothers Big Sisters <input type="checkbox"/> Shelter			

PLEASE ATTACH INCOME VERIFICATION (i.e., Paystubs, Most current Notice of Assessment, Canada/Alberta Child Benefit, Social Benefits: EI, CPP, IS, AISH,WCB, Child support, and any other source of income).

Applications will not be completed without verification.

Why are you applying for campership?

CHILD/YOUTH INFORMATION

1. Child / Youth Full Name		Age	Camp Session Registered For:
Has this child attended Camp Alexo in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO		Has this child received a campership in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO	
2. Child / Youth Full Name		Age	Camp Session Registered For:
Has this child attended Camp Alexo in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO		Has this child received a campership in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO	
3. Child / Youth Full Name		Age	Camp Session Registered For:
Has this child attended Camp Alexo in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO		Has this child received a campership in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO	

If approved, subsidy will be made available to each child/youth in the household for One (1) Camp ONLY