



South Shore YMCA, Camp Burgess & Hayward Financial Assistance Application



Please note that we only accept and review **complete** applications, containing:

- Completed Financial Assistance Application;**
- Copy of your most recent Federal Income Tax Form;**
- Verification of income (paystub) or unemployment;**
- \$50 deposit per participant, per program/session, if you did not register and pay a deposit online. *Please attach a check or provide credit card details below.***

Credit Card Type: _____

Card Number: _____

Expiration Date: _____/_____/_____ Security Code: _____

Name as appears on card: _____

Authorized Signature: _____

The deposit will not be processed until you have been awarded and accepted a scholarship.

Financial Assistance FAQ's:

When and how can I submit my application?

Applications are accepted as soon as we open registration, up until two weeks prior to the start of the session for which you are applying. Send completed application and accompanying documentation in one envelope- we do not accept pieces of the application separately, nor do we accept faxes.

Mail completed applications to:

Camp Burgess & Hayward
75 Stowe Road, Sandwich, MA 02563

How long will it take to review my application?

Applications are reviewed in the order in which they are received; you will receive a reply via email within 7-10 business days of receipt of your application regarding your eligibility for assistance.

How many sessions can I apply for?

Financial assistance is applicable to two (2) weeks of summer programming and one (1) non-summer program per participant, per year.

When does my balance have to be paid in full?

All participant balances must be paid in full no later than two weeks prior to the start of the program. Failure to remit payment on time will result in automatic cancellation.



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Parent/Guardian Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email Address: _____

IMPORTANT

Please attach the following to your application:

- Copy of your most recent **federal income tax form (Form 1040, pages 1 & 2 ONLY)**
- Recent **pay stub** or **verification of income, or proof of unemployment.**
- \$50 deposit (per camper, per session)-** if you did not register and pay a deposit online

Please list all people living in your household, including yourself.

Name	Current Age	Name of Employer/School

Have you ever applied for financial assistance before from Camp Burgess & Hayward? Yes No

If yes, how much have you received previously per child? 2021 \$ _____ 2019: \$ _____

Financial Information

Please itemize your monthly, pre-tax income and expenses:

	Monthly Household Income		Monthly Household Expenses
Gross wages/salary (household)		Rent/Mortgage	
Child Support		Food	
Social security		Medical	
Food Stamps		Utilities	
Retirement Income (Non-social security)		Car	
Other Income (please explain)		Tuition	
Total Monthly Income		Other (please explain)	
		Total Monthly Expenses	

How much can you afford to pay towards our programming for each child? \$ _____



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Please explain why you are applying for Financial Assistance. If your child/ren is a returning participant, please tell us how our programs have been beneficial and impactful to you and your child/ren.

We are working to gather stories of impact that relay the good work that we do!

Would you be willing to share your family's Camp Burgess & Hayward story with us to help us garner support for our Campership Fund?

- Yes, I would like to share our story - feel free to quote what I've written here.
- Yes, I would like to share our story - but, please keep it anonymous.
- No, I do not want to share our story.

To the best of my knowledge, the information submitted in this application is correct.

Name: _____

Date: _____

Signature: _____



FINANCIAL ASSISTANCE PARTICIPANT INFORMATION

You may use this form for up to four participants/siblings living in the same household



Participant #1
Name: _____
Gender: _____
Grade completing in June: _____
Date of Birth: _____ **Age:** _____

Burgess-Hayward
 Specify Session(s): _____
 Dates: _____

Adventure Trips
 Specify Trip(s): _____
 Dates: _____

Year-Round/Non-Summer
 Specify Program: _____
 Dates: _____

Financial assistance is applicable to 2 weeks of summer programming and 1 non-summer program per participant, per year.

Participant #2
Name: _____
Gender: _____
Grade completing in June: _____
Date of Birth: _____ **Age:** _____

Burgess-Hayward
 Specify Session(s): _____
 Dates: _____

Adventure Trips
 Specify Trip(s): _____
 Dates: _____

Year-Round/Non-Summer
 Specify Program: _____
 Dates: _____

Financial assistance is applicable to 2 weeks of summer programming and 1 non-summer program per participant, per year.

Participant #3
Name: _____
Gender: _____
Grade completing in June: _____
Date of Birth: _____ **Age:** _____

Burgess-Hayward
 Specify Session(s): _____
 Dates: _____

Adventure Trips
 Specify Trip(s): _____
 Dates: _____

Year-Round/Non-Summer
 Specify Program: _____
 Dates: _____

Financial assistance is applicable to 2 weeks of summer programming and 1 non-summer program per participant, per year.

Participant #4
Name: _____
Gender: _____
Grade completing in June: _____
Date of Birth: _____ **Age:** _____

Burgess-Hayward
 Specify Session(s): _____
 Dates: _____

Adventure Trips
 Specify Trip(s): _____
 Dates: _____

Year-Round/Non-Summer
 Specify Program: _____
 Dates: _____

Financial assistance is applicable to 2 weeks of summer programming and 1 non-summer program per participant, per year.

Summer Programs Cancellation Policy:
 Cancel *before* May 1, 2022– 100% program fees paid are refundable, **less non-refundable deposit***
 Cancel *on or after* May 1, 2022– 50% program fees paid are refundable, **less non-refundable deposit***
 Cancel *within 14 days* of program start date – No refund, except in the case of medical necessity (documentation required).*
***Deposits are not refundable or transferrable under any circumstances.**

Non-Summer Programs Cancellation Policy:
 Cancel *within 14 days* of program start date – No refund, except in the case of medical necessity (documentation must be Provided by a medical professional).*
***Deposits are not refundable or transferrable under any circumstances.**