



**BOYS & GIRLS CLUB
OF MANCHESTER**

**2023 SUMMER PROGRAMS
FINANCIAL ASSISTANCE APPLICATION**

ALL FINANCIAL APPLICATIONS ARE DUE: Friday, February 17, 2023

CAMP FOSTER REGISTRATION BEGINS: Wednesday, March 1, 2023

IMPORTANT FINANCIAL ASSISTANT INFORMATION FOR SUMMER PROGRAMMING:

1. A limited amount of financial assistance is available.
2. Campers who received financial aid last year and did not submit a cancellation notice in writing or pay the balance are ineligible for financial assistance this year.
3. **Members who regularly attend our school year program receive priority consideration.**
4. We will notify you in writing if you receive assistance.
5. You must re-apply for the 2023 summer camp season. Financial aid does not carry over from the school year or previous camp sessions.
6. We require proof of income for all adults financially responsible for the child/children. If your financial information is not attached, we will not process your application and return it to you. We accept the following for proof of income:
 - Last month's pay stubs
 - Previous month's unemployment benefit notice
 - Previous month's disability/social security benefit notice and a letter from the State of NH showing Childcare Step and coverage dates.
7. When determining financial assistance, your child's past behavior as a Club member or summer camper will have an impact.
8. NH State Law requires that we have a physician's statement and immunization records on file for each camper.

Name of Children for whom you are requesting assistance for that live in household full time:

Name

Age

Name

Age

Name

Age

Name

Age

Name

Age

How many weeks of camp are you requesting for each child? _____

Are the children current Club members or past campers? Yes No

Excluding the children named above, please list everyone, yourself included, who live in your household full time.

Name	Age	Relationship to You
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____ Total adults and children living in household full time

Please explain any extenuating circumstances below:

Name: _____ Cell Phone: _____ Email: _____

Mailing Address