BOYS AND GIRLS GO TO CAMP
CAMPERSHIP APPLICATION FOR UNDERSERVED/AT-RISK YOUTH

Are you a parent, guardian, teacher or other interested adult who cares for a child who is withdrawn or not making friends? Has your child stopped taking interest in team sports, spends less time with the rest of the family, flies out of control, or seems to constantly defy your authority? Have you noticed a drop in grades or a change in those with whom your child socializes? If you notice these signs, you may have a child that is dealing with peer pressure or challenges that will put them at risk.

If this sounds like your child, the Boys and Girls Foundation would like to help by offering your child an opportunity to change their direction back to a more positive path with an enriching experience at camp. Please send us a letter describing your child's situation. We promise to keep the information you share confidential. If your child is selected for a campership, you will receive a campership voucher valued at $250 a list of participating camps can be found on our website.

Camp applications must be received no later than April 30, 2016, applications received after that time will not be considered for funding.

To qualify for a "campership" for summer camp, the applicant should be between ages 6 and 17. Only one campership per year is awarded to each individual. A list of qualifying camps is posted on our website at www.boysandgirlsfoundation.org

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CHILD'S INFORMATION

Last Name_____ First _____ Date of Birth_____

check one: Boy _____Girl_____

Parent/Guardian _____ Relationship to child_____

Address_____

City _____ Zip_____ Day Phone _____

Alternate phone number/English speaking_____

Email_____

How many are in your immediate family? _____ Amount of Annual Gross (before tax) Income $_____

Does this child qualify for the free or reduced lunch program at school? Yes___ No ___

Is family receiving Public Assistance?_____ Case Number_____

Is this a foster home? ____yes ____no

Is this person related to a disabled American veteran? ____yes ____no

How did you hear about this program_____

Has your child received a camp scholarship in prior years?_____

Please check voluntary demographic information:

Military ( )	Latino( )
Disabled ( )	Asian Pacific ( )
African American( )	Native American ( )
Caucasian ( )	Other/Multi ( )

In the space provided below, please describe your child's circumstance and how a trip to camp might help:

_____If I am funded I will agree to submit an evaluation of my camping experience.

I have completed this application, and to the best of my knowledge, all of the information is true, correct and complete.

_____ _____

Signature of person completing the application Print Name

PLEASE RETURN THESE FORMS TO:

Boys and Girls Foundation
2730 Historic Decatur Road, Suite 201
San Diego, Ca 92106
(619)683-2192, fax (619)615-2026
www.boysandgirlsfoundation.org
mwatwood@boysandgirlsfoundation.org

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