



**Summer Camp Financial Aid
Application / Registration for 2017**
(You do not need to fill out the other registration form.)
(Deadline: received by April 14, 2017)

Which camp are you applying for? _____

Camp Dates _____

Camper's Information: Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ *Is this home? or cell?*

E-mail _____ Sign me up for Tremont's bi-weekly e-newsletter.

Male ___ Female ___ Date of birth ____ / ____ / _____ Age of camper when camp starts _____

Parent/Guardian's Information: Name _____

Address _____ City _____ State _____ Zip _____

Home phone (_____) _____ Work phone (_____) _____

E-mail _____ Sign me up for Tremont's bi-weekly e-newsletter.

How did you hear about this camp? _____

Please attach the following two documents. Applications will not be processed without these letters.

1. A letter written by the camper expressing why she/he wants to come to camp, what she/he would contribute, and how she/he would benefit from camp.
2. A letter from a parent, guardian, or teacher expressing the reasons why financial aid funding is needed.

Deposit: \$100 refundable deposit is required with this application.

Enclosed is check # _____

All applications must be received by April 14, 2017. The financial aid committee will review applications and make decisions by the end of April. We will notify you by e-mail (or letter) of the amount that you were awarded. The balance, your portion, will be due at that time. If you cannot pay your balance, your \$100 deposit will be refunded to you.

Cancellations received up to two weeks prior to the program start date will be refunded in full, minus a \$50 processing fee.

For office use only:	
Date recvd	_____
Program #	_____
Prog code	_____
CR#	_____
Date	_____
\$	chk#