

185 Old Broadway, Hastings-on-Hudson, NY 10706 (914) 775-7058 camp@hudsonlabschool.com

## Financial Assistance Application

Camp Hudson hopes to make camp possible for all campers who wish to attend. When evaluating financial assistance awards we consider factors such as household income, number of dependents, illness in the family, college tuition, and more.

Our ability to award financial assistance is based on space availability in our program, full completion of this application, and the availability of assistance funds. A financial assistance award may not be combined with any other discounts.

A \$50 deposit is due at the time of this financial assistance application and will be returned, upon your request, if financial assistance is unavailable or if you decide not to enroll in camp. If you enroll in camp this deposit will go towards your balance due.

Our financial assistance committee will safeguard the confidentiality of all financial information received. In turn, we ask that families refrain from discussing any financial aid they've been awarded.

If you are applying for aid please wait to enroll your child(ren) in camp until we've processed your financial assistance application and responded.



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				_M _F
Camper's Name: Last	First Name		Age	Gender
Current School		Grade in Fall 2018	# Weeks Applying For	
Was your child enrolled at Camp Hudson I	ast summer?	<u> </u>		
Camper's parent(s) is/are Sing	le <u> </u>	➡ Separated/Divorced		
Total # of dependents		_		
Parent/Guardian 1		Parent/Guardian 2	(where applic	able)
Mother				
Parent/Guardian 1 Name		Parent/Guardian 2 Nam	ne	
Tel (best # to reach you)		Tel (best # to reach you)	1	
Email		Email		
Address		Address		
City State	Zip Code	City		State Zip Code
Occupation		Occupation		
Employer		Employer		
Title		Title		
The following information must be included  \$50 check	in order to process your	application:		
First page of latest Income Tax Form	1040 for family or both	parents if filing separately		
Number of adults and children in your	•			
Current household income (please incl	ude any additional outsi	de support):	_	
A brief letter describing your current     Number of dependents     Do you receive financial help fr	financial situation. This sh	nould include the following:		
* Are you or anyone in your house			tion or caring for c	an elderly relative)

\* As parents, how much do you feel you can contribute to your child/ren's summer camp tuition?
\* Please add any unusual circumstances or additional information you would like us know.

Have there been or do you expect changes in your financial situation? Please explain.

If grandparents or other family members are expected to help with camp costs, how much will they provide?