

Camp@thenatureplace.com
P 845.356.1234 F 845.356.9676



285 Hungry Hollow Road
Chestnut Ridge, NY 10977

Financial Assistance

The Nature Place Day Camp 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.

We strongly encourage the application of families of color, those who do not define their race as 'white', families with children who do not fall into our culture's binary gender system, and families of varied religious beliefs.

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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Camper's Name: _____ Age: _____

Mailing address: _____

Applying for: _____ weeks

Was your child enrolled at The Nature Place Day Camp last summer? Y N

Camper's parents are Married Separated Divorced

If separated or divorced, name of parent who has custody of camper: _____

Name of parent who claimed camper as an income tax exemption: _____

(for divorced families or those not filing joint returns, we need federal returns from EACH parent)

Parent 1	Parent 2
<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____ <input type="checkbox"/> Deceased	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____ <input type="checkbox"/> Deceased
Name:	Name:
Address:	Address:
Phone (best # to reach you):	Phone (best # to reach you):
Email:	Email:
Occupation:	Occupation:
Employer:	Employer:
Title:	Title:

The following information must be included in order to process your application:

- \$50 check
- First page of latest Income Tax Form 1040 for *both* parents (no substitutes)
- Number of adults and children in your household: Adults _____ Children _____
- Current household income (please include any additional outside support): _____
- A brief letter describing your current financial situation. This should include the following:

* Number of dependents

* Do you receive financial help from another family member or friend?

* Are you or anyone in your household helping to support others? (i.e. paying college tuition or caring for an elderly relative)

* 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?

* 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.