Friends of Camp Turner Campership Application

Camper Information: Name _____ Date of Birth: Former Camper? _____Yes / ____No Campership amount requested: \$______ COUNTY OF RESIDENCE: Other camps attending this summer: Parent/Guardian Information: Name: ______ Name Relationship to Camper: _____ Street Address: _____ City: ____ State: ___ Zip: ____ Home Phone: ______ Work: _____ Mobile _____ Email Address: _____ Number of wage earners living in household: ______ Number of dependents in household: _____ Most recent Household Income: _____ Expected Household Income: _____ Other Assistance: Is camper already receiving direct assistance from Camp Turner? ____Y / ___N If yes, amount: _____ Is camper receiving financial assistance from another agency? ____Y / ____N If yes, amount: _____ Agency Name: (if any) Agency Address: Telephone Number: _____ Email Address: _____ Contact Name: Additional Questions: (Parent/Guardian, please attach additional sheet or back of application if needed) Reason you are requesting financial assistance:

What specific special or non-financial circumstances would you like us to consider in our award determination?	
Why are you choosing Camp Turner and what do you	u hope your child will gain from the experience?
Camp Turner is not responsible for award determina	by the Friends of Camp Turner, Inc., not Camp Turner itself. Itions. Awards are based on funds available. I agree that I amed by campership grants, will send the registration down Il information provided is true and accurate.
of Camp Turner (FOCT) is a separate 501(C)3 not-for- Lady of Victory Homes of Charity, DBA OLV Charities is the sponsoring organization for Camp Turner (CT). to provide financial support for scholarships that end financial assistance to CT for the enhancement and ended below, you give permission for Friends of Camp Turn	between Friends of Camp Turner and OLV Charities. Friends -profit. Camp Turner (CT) is a program of OLV Charities. Our (OLVC), is a separate 501(C)3 not-for-profit corporation and F OCT partners and works in conjunction with OLVC and CT able children to attend Camp Turner. FOCT may also provide establishment of existing and new programs. By signing ner to share your campership application information with
OLV Charities and Camp Turner limited to specific bu CT will be held in a confidential manner to be used for	isiness purposes. Information obtained by FOCT, OLVC, and or those specific business purposes only.
signature of Parent / Guardian (Required)	Date
Please email completed applications to: friendsofct@	gmail.com OR mail to:
Friends of Camp Turner C/O Campership Committee P.O. Box 51	

Tonawanda, NY, 14150.