



SJ Riding Camp Campership Application - 2017

Dates applying to attend camp: _____

Camper identifies as: Female Male

Camper's Full Name _____

Date of Birth _____ Age as of 7/1/17 _____

School _____

Town _____

ST _____

Grade in Sept '17 _____

Parent/Guardian 1 Name _____

Home Phone _____

Cell Phone _____

Mailing Address _____

City/Town _____

ST _____

Zip _____

Currently Employed? Yes No

E-mail _____

Employer/Company _____

Occupation _____

Employer Phone _____

Number of Household Members: _____

Total Gross Yearly Household Income: \$ _____

Qualify for free/reduced lunch? Yes No

Active duty military parent/guardian? Yes No

Additional information to support financial need (job loss, disability, health, debt, etc.)

(Attach additional paper, as needed)

I am able to provide _____% of the camp tuition or \$ _____.

By signing this campership application, I certify that the information on this form is true and correct. I consent to the use of photographs, letters, and images taken of my child taken at camp for the camp and ACA New England Campership Fund public relations efforts. I understand that I must complete all of the paperwork requested by the camp, and a physician must complete the medical form sent by the camp about my child's health history. I understand that this summer camp opportunity is a privilege provided courtesy of the ACA New England Campership Fund and the participating camp, and I will make sure that my child arrives promptly at camp on the designated start date. I understand that the application to the program does not guarantee participation. I further understand that ACA New England Campership Fund is merely a funder of this project and is not liable for any issues between a camp and an enrolled child. I acknowledge that I am financially responsible for any fees not covered by approved campership funds. I promise to send a thank you note from my camper after she attends camp.

Parent/Guardian Signature _____

Date _____

Please return by April 1 to: SJ Riding Camp, 130 Sandy Beach Road, Ellington, CT 06029

The camp director's signature acknowledges that the camp has received verification of camper's financial eligibility and school enrollment.

Signature of Camp Director _____

Date of receipt of verifications _____