

Annual Household Income

- Under \$10,000 \$10,000 - 20,000 \$21,000 - 40,000 \$41,000 - 60,000
 \$61,000 - 80,000 \$81,000 - 100,000 \$100,000+

Other Assistance Programs

Do you currently receive any Government, State or other Assistance? Yes No

If you answered yes to this question, please identify which ones below.

Yes, Applied but
Application Pending

- Bus Pass Assistance Car Assistance Cash Assistance
 Clothing Assistance Day Care Assistance Discounted Lunches
 Food Stamps Free School Lunches Health Wave
 LEAP Utility Assistance Medical Card Parental Care Assistance
 Personal Care Assistance Section 8 Housing WIC
 Work Program Other (Please Specify): _____

Type of Health Insurance

- None Health Wave Medical Card Medicaid Medicare
 Private Insurance Group Insurance Other (Please Specify): _____

Summer Camp Attendance

Do you currently attend any other summer camps? Yes No No, have in the past

Please identify which summer camps you have attended below.

- Camp Barnabas Camp Donovan Camp Wonderland Jaycees CP Ranch
 MDA Camp Other (Please Specify): _____

Does the summer camp impose an age limit for campers? Yes No Unknown

(If Yes to question above, please identify age limit.): _____

What is the Camper / Counselor / Senior Staff ratio?

(For example, at Camp Adventure it is 1 / 1 / 1+): _____

Do they offer Camperships, Scholarships or
Other Financial Assistance?

Yes No Unknown

Other Summer Camp Cost

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Under \$200 | <input type="checkbox"/> \$200 - \$400 | <input type="checkbox"/> \$401 - \$600 | <input type="checkbox"/> \$601 - \$800 |
| <input type="checkbox"/> \$801 - \$1,000 | <input type="checkbox"/> \$1,001 - \$1,200 | <input type="checkbox"/> \$1,201 - \$1,400 | <input type="checkbox"/> \$1,401 + |

Fundraising Information

Have you actively participated in Camp Adventure's planned fundraisers? Yes No

If you answered yes to this question, please identify which ones below.

- | | | |
|--|--|--|
| <input type="checkbox"/> Yearbook Ad Sales | <input type="checkbox"/> Drawing Ticket Sales | <input type="checkbox"/> Coupon Book Sales |
| <input type="checkbox"/> Label Collection | <input type="checkbox"/> Keep Your Trash: Ink
Cartredges Aluminum | <input type="checkbox"/> Poker Tournament |
| <input type="checkbox"/> Pizza Punch Cards | <input type="checkbox"/> Easter Egg Hunt | <input type="checkbox"/> Open House |
| <input type="checkbox"/> Garage Sale | <input type="checkbox"/> Family Festival | <input type="checkbox"/> Fish Fry |
| <input type="checkbox"/> Fireworks Stand | <input type="checkbox"/> Calendar Sales | <input type="checkbox"/> Simon Evening of Giving |
| <input type="checkbox"/> Haunted Hayride | <input type="checkbox"/> Christmas Parade | <input type="checkbox"/> Christmas Festival |
| <input type="checkbox"/> Yearbook Sales | <input type="checkbox"/> Trading Post: T-Shirts | <input type="checkbox"/> Trading Post: Picture Sales |
| <input type="checkbox"/> Trading Post: Video Sales | <input type="checkbox"/> General Store at Camp | <input type="checkbox"/> Bucket Brigade |
| <input type="checkbox"/> Other (Please Specify): _____ | <input type="checkbox"/> Other (Please Specify): _____ | |

How much did you raise via fundraising efforts? _____ Unknown

Scholarship Solicitation

Do you participate in soliciting scholarships by providing 8 different contacts to Camp Adventure Inc. annually for the directors to send Yes No

How many scholarships did you receive last year? _____ Unknown

What was the total monetary value of your scholarships last year for Camp Adventure? _____ Unknown

Representative

Did anyone help you (Applicant) fill this form out? Please fill out info below. Yes No

(Representative Name)

(Relationship to Applicant)

(Phone Number with Area Code)

Paragraph of Need

Please write a paragraph explaining your need for a Campership. Include in your paragraph how you intend to help Camp Adventure raise the funds to cover the cost of your Campership.

Campership Agreement

Please read through the Campership Agreement. If you agree to the terms, please sign and date the application and return to the Topeka office at 1910 NW Wilcox Court Topeka, KS

- I will turn in the Campership Application by the deadline date of March 1st.
- I will submit 8 contacts for Scholarships that is required by all campers that are not paying the full price of their camping experience, which is \$1050.00 and an additional 4 contacts for a total of 12 contacts for Scholarships.
- I will participate in at least 4 fundraisers this year to help raise the funds for my Campership.
- I will help keep track of my participation efforts and use the following formula to do so. (\$500 Requested Camper Fee + \$350 Scholarships + \$200 Fundraising Proceeds = \$ 1050 The Total Cost to Attend Camp)
- If I receive a Campership, I understand that I am expected to help raise the funds for the Requested Camper Fee as well as, the entire cost of my camping experience through following the items described above. Furthermore, I understand that I am not required to raise the entire amount via fundraising and scholarships, however, I am required to put forth a valent effort.
- I hereby certify that I have not knowingly withheld any information that might adversely affect my chances of obtaining a Campership and that the information contained in this application is true and correct to the best of my knowledge. I understand that any omission or misstatement of material fact on this application could be grounds for rejection of this application and my application for summer
- I hereby authorize Camp Adventure Inc. to thoroughly investigate the information provided on this application. In addition, I hereby release Camp Adventure Inc., The Board of Directors, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

(Applicant's Signature)

(Guardian or Parent's Signature)

(Date)