



2020 Campership Request

****Please complete entirely, include verification of camp registration, confirmation letter and any paid receipts.****

Parent & Camper Information

Parent Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Telephone: Home: _____ Work: _____ Cell: _____

E-mail _____

Address: _____

Campers Name: _____ Age: _____ Grade: _____

Campers _____

Diagnosis: _____

Is a 1:1 Aide or Part-time Paraprofessional provided at school or needed? Yes No N/A

Camp Information

Camp Name: _____ Camp Phone: _____

Camp Website: _____ Day or Residential: _____

Days Attending:	Mon.	Tues.	Weds.	Thurs.	Fri.
Hours per day:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Camp Fee 1 Session \$ _____ Amount Family Paid: \$ _____

Note: Families are asked to contribute 25% of the camp session cost and anything exceeding a \$750 campership award.

Financial Assistance Information

Are you pursuing any of the following financial assistance options?

*Harry Alan Gregg Foundation- Yes No *Civic Organization _____ Yes No

*Scholarship from your child's camp- Yes No *Camp Payment Plan _____ Yes No

*School District Summer IEP Funding- Yes No *Other _____ Yes No

If you have stated NO to any of the above financial assistance options, please state why:

Campership Request: \$ _____

*Campership requested amount for one session of camp less family paid 25% not to exceed \$750

Deadline to Submit a Campership Request is May 22, 2020

Gateways Community Services, 144 Canal Street, Nashua, NH 03064 (603)882-6333 Fax 889-5460 V1 2.19.20