

SECTION I

**CAMP HOLLIS
CAMPER APPLICATION FOR
EIGHT YEAR OLD OVERNIGHT**

Child's Name _____ Last _____ First _____ Nick Name _____

Address _____ Street/Road/Route _____ City _____ Zip _____

Date of Birth ____/____/____ Age ____ Sex ____ County of Residence _____

School _____ Present Grade _____

Name of Mother/Guardian _____ Name of Father/Guardian _____

Mother/Guardian Home Phone No. _____ Father/Guardian Home Phone No. _____

Mother/Guardian Work No. _____ Father/Guardian Work No. _____

Mother/Guardian Cell Phone No. _____ Father/Guardian Cell Phone No. _____

In the event parent/guardian cannot be reached and advice and/or permission is needed, the next responsible adult who is to be contacted locally is (Please provide a different contact person and contact information from information listed above):

Name _____ Address _____

Phone No. _____ Alternate Phone No. _____ Relationship to Camper _____

**I give my permission for my child's picture to be taken and used for publicity purposes only. ___ Yes ___ No*

**I give my permission for my child to self-administer sunscreen to prevent over exposure to the sun. ___ Yes ___ No*

SECTION II OSWEGO COUNTY RESIDENTS' FEE DETERMINATION (NON-RESIDENTS PAY \$75)

Foster Child: **S** _____
Case No.

Child Receiving Cash Public Assistance: **PA** _____
Case No.

GROSS ANNUAL INCOME ELIGIBILITY GUIDELINES

FEES → (Circle amount you will pay)	CATEGORY 1 \$20 If total household income is equal to or less than:	CATEGORY 2 \$30 If total household income is between:	CATEGORY 3 \$55 If total household income is between:	CATEGORY 4 \$70 If total household income exceeds Category 3
Number of Persons In Household	Include income from Child Support, Alimony, SSI, Unemployment, etc.			
1	\$15,444	\$15,445 - \$21,978	\$21,979- \$30,888	If total household income is more than amount in CATEGORY 3
2	\$20,826	\$20,827 - \$29,637	\$29,638- \$41,652	
3	\$26,208	\$26,209 - \$37,296	\$37,297 - \$52,416	
4	\$31,590	\$31,591 - \$44,955	\$44,956 - \$63,180	
5	\$36,972	\$36,973- \$52,614	\$52,615 - \$73,944	
For each additional family member add:	\$5,408	\$7,696	\$10,816	

My signature certifies that my total household income is accurate and indicated by the fee amount I am paying: \$ _____.

Parent/Guardian Signature _____

Child must be 8 years old by the first day of camp. Please understand that age groups are set up to provide a happy and safe experience for our campers...no exceptions for age groups can or will be made.

Families experiencing extreme circumstances or difficulties are encouraged to contact our office (315-349-3451) for information regarding financial support beyond the sliding scale.

Once Camper Application and Payment is received then all other registration forms (Medical Form, Immunization Record, USDA Form) will be sent and must be complete to finalize your spot for Camp Hollis.

Completed Registrations are accepted on a first come, first served basis.

Please check this box if you are applying for a scholarship

Please check this box if you need assistance with camp supplies*

*If you fall within category 1 or category 2 and need help with camp supplies (sleeping bag, swimsuits, etc.) please list a name and a number that we can use to contact you and see what we can do to assist.

Name: _____ Phone Number: _____

Overnight Dates*: June 25 _____ July 9 _____ July 23 _____

*(Age By first day of Camp) _____

- FOR OFFICE USE ONLY -

Before application can be accepted and the application process is complete please make sure:

Date Application Received _____	Date Welcome Packet/Medical Form Sent _____
Medical Form Received: Yes _____ No _____	Up-to-Date Immunizations Received: Yes _____ No _____
USDA Form Required: Yes _____ No _____	Completed USDA Form Received: Yes _____ No _____
Photo/Sunscreen Permission Checked: Yes _____ No _____	
Alternative Emergency Contact Given: Yes _____ No _____	
Date DSS Verification Letter Sent _____	Date DSS Verification Letter Received _____
Check or Money Order Date _____	Amount Paid _____
Check No. _____	Money Order No. _____
Friends of Camp Hollis _____	