



Application for Financial Assistance

Cairn's Campership Fund is supported by generous donations from individuals and organizations who value the opportunity that Cairn's programs provide, and want to help remove financial barriers so campers and adult participants can attend Cairn programs. In order to be able to allow this fund to support as many families as possible, Cairn's Campership Fund can assist in covering up to 50% of the registration fee for one camp session per person each year.

All information collected is confidential and will be used only for the purpose of administering financial assistance.

PARTICIPANT INFORMATION

First Name: _____ Last Name: _____
Street Address: _____ City: _____
Postal Code: _____ Birthdate: _____ (MM/DD/YYYY)
Cairn Camp Session: _____
Cairn Session Dates: _____

PARENT/GUARDIAN INFORMATION (if participant is younger than 18)

Name: _____
Relationship to participant: _____
Address (if different from above): _____
Email Address: _____ Phone Number: _____

How much of your total registration fee are you requesting to be covered by the Cairn Campership Fund?

*Note that all Campership recipients will also have HST waived from their registration fee.

10% 20% 30% 40% 50%
Other: (% or \$ amount) Please explain: _____

ADDITIONAL INFORMATION

Where did you hear about Cairn? (if from a friend/family member/church, please share their name): _____

Where did you learn about Cairn's Campership fund? _____

What church are you affiliated with, if any? _____

Has your family accessed Cairn's Campership or other camp funding programs before? Yes No

Which funding program(s): _____

Signature: _____ Date: _____

Please submit the completed form to admin@ilovecamp.org.

Following receipt of this completed form, you will be contacted by the Cairn Office to discuss your application.