

YMCA CAMP OCOEE

Dear Parent,

Thank you for considering YMCA Camp Ocoee to serve your family this summer. The YMCA of Metropolitan Chattanooga is a not-for-profit health and human services organization committed to helping people grow in spirit, mind and body. The YMCA is here to serve people of all ages, backgrounds, abilities and income. We are community-based and believe that our programs and services should be available to everyone. That's why the YMCA offers camp scholarships for those who financially qualify.

Volunteers in the YMCA raise funds for our Community Support Campaign. Funds are used for providing scholarships to youth and families who need financial assistance. Providing funding to our community is subject to the availability of funds collected in the Community Support Campaign.

To qualify for a scholarship, you must meet the following guidelines:

- Scholarships are awarded for a camper to attend up to 2 camp sessions per summer
- Proof of Income (IRS 1040 form (first 2 pages) or pay stubs, etc...)
- Camp Registration Form
- Extenuating circumstances may be taken into consideration, but must be documented on the application. If the parent or guardian is enrolled in college or trade school, a copy of your enrollment must be included.
- No deposit is required with your application

Complete scholarship applications will be reviewed in the order they were received, please allow 2-3 weeks for processing. Scholarships will be given until the available scholarship funds are exhausted. Incomplete applications will be returned to you with a list of your missing items.

If you have any questions, or need help in completing the forms, please contact us at 423-338-5588. We are excited to get to know your child and welcome them to a summer of fun, friendships and memories.

Sincerely,

YMCA Camp Ocoee info@campocoee.com

111 YMCA Drive • Ocoee, TN 37361 • 423-338-5588 • Fax: 423-338-5507 • www.ymcacampocoee.org

A Service of the YMCA of Metropolitan Chattanooga

Mission: To put Christian principles into practice through programs that build a healthy spirit, mind and body for all.

YMCA Camp Ocoee Scholarship Application

Parent Name:	Date	e of Birth:	
Address:	Phone #:		
City:	State:	Zip:	
E-mail:			
 You: Spouse: Child/Dependent: Child/Dependent: Child/Dependent: Child/Dependent: Child/Dependent: Child/Dependent: 	e if different from applicant) an	Age: Age: Age: Age: Age: Age: Age:	
Employer:	Work Phone:		
Address:	City:	State:	Zip:
Position:	Length of Employment:	□ Pa	rt Time 🛛 Full Time
Supervisor's Name:			
Spouse's Employer: :		Work Phone:	
Address:	City:	State:	Zip:
Position:	Length of Employment:	□ Pa	rt Time 🛛 Full Time
Cabalanabin Statement			

Scholarship Statement

We are proud to offer scholarship assistance for individuals and families through our Community Support Campaign. We request applicants provide a response to the question below. This information is confidential.

If you have received a scholarship to YMCA Camp Ocoee in the past how did this camp experience impact your child and family? If you have not received a scholarship in the past what are your expectations for your child's camp experience?

Income/Expense Worksheet (please print clearly)

Income	Expense			
Your Gross Monthly Income	\$	🗆 Rent 🗆 Mortgage		
Spouse's Gross Monthly Income	\$	Auto Loan		
\$ Child Support	\$	Utilities		
Aid to Dependent Children	\$	Phone listed in your name		
\$ Welfare	\$	Medical		
\$ Food Stamps	\$	Child Care		
\$ Interest Income	\$	School Tuition		
Yes ON Reduced Lunch Program	\$	Other (please explain below)		
<pre>\$ Other (please explain below)</pre>				
Are you paid weekly, biweekly, twice a month or monthly?				
\$ Total Gross Monthly Income	\$	Total Monthly Expenses		
Total Gross Yearly Income				
Do you share expenses with anyone else living in your household? \square Yes \square No				
Total number of persons living in your house?				
Explanation of "other" Income/Expenses:				

In order to process your application, we must have at least one of the following:

- A. If you are working or retired with benefits
 - a. Prior year's tax form 1040 (first 2 pages)
- B. If you are unemployed
 - a. Proof of unemployment benefits
- C. If you are disabled
 - a. Proof of disability benefits
- D. If you are SSI or SSA benefits
 - a. Proof of Social Security benefits

Scholarship Agreement

I accept and agree that all fees are to be paid on time and prior to program participation.

I hereby certify that the above information is true and complete to the best of my knowledge. I agree to inform the YMCA immediately of any changes in the above information. I understand that false information could jeopardize my scholarship assistance. I hereby give permission to the YMCA of Metropolitan Chattanooga and its representatives to contact individuals or employers for salary and bill verification. In order to maximize what the YMCA of Metropolitan Chattanooga is able to offer, I understand that I will be asked to pay a percentage of my child(s) camp fees.

Signature:	Date:

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