



**JAMES L. McKEOWN
BOYS & GIRLS CLUB
OF WOBURN**

James L. McKeown
Boys & Girls Club of Woburn
Charles Gardner Lane
Woburn, MA 01801

(781) 935-3777
info@bgcwoburn.org
www.bgcwoburn.org

For Office Use Only v1 3/6

Date Received _____
Full Application attached? YES NO
Deposit Amt. Paid _____
Approved _____
Co Pay Rate _____

Summer Camp Financial Aid Application

Please PRINT all information and answer all questions.
This information is essential to assist in better serving your child. All information is kept confidential.

Application Deadline is Friday, April 12, 2019.

No applications will be considered after this date.

Financial assistance is limited. Please provide all requested information.
If you have any questions or need any assistance in filling out this form, please contact the Club at 781-935-3777.
All decisions will be postmarked by April 29, 2019.

Parent/Guardian #1

Name _____
Address _____
Street _____ City/Town _____ State _____ Zip Code _____
Home Phone _____ Cell Phone _____
E-Mail _____
Employment _____ Full Time Employed _____ Self Employed _____ Part Time Employed
_____ Unemployed (Please provide documentation.)

Employer

Name _____
Address _____
Street _____ City/Town _____ State _____ Zip Code _____
Phone _____ Your Position _____
Pay _____ Salary _____ Hourly _____ Annual Income _____

Parent/Guardian #2

Name _____
Address _____
Street _____ City/Town _____ State _____ Zip Code _____
Home Phone _____ Cell Phone _____
E-Mail _____
Employment _____ Full Time Employed _____ Self Employed _____ Part Time Employed
_____ Unemployed (Please provide documentation.)

Employer

Name _____
Address _____
Street _____ City/Town _____ State _____ Zip Code _____
Phone _____ Your Position _____
Pay _____ Salary _____ Hourly _____ Annual Income _____

If there are additional employers, please attach the information to this application.

Please identify any and all sources of additional income & support (ex. child support, AFDC, TANF, alimony...)

Parent/Guardian #1

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Parent/Guardian #2

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Description: _____ Monthly Amount _____

Name(s) of Camper(s)	Date of Birth	Entering Grade	Current Club member?
_____	_____	_____	___ Yes ___ No
_____	_____	_____	___ Yes ___ No
_____	_____	_____	___ Yes ___ No
_____	_____	_____	___ Yes ___ No
_____	_____	_____	___ Yes ___ No

For how many weeks of camp are you seeking assistance? _____

Child(ren) lives with (please check all that apply):

- | | | |
|---------------------|----------------------|------------------|
| ___ Parents | ___ Guardians | ___ Aunt/Uncle |
| ___ Parent (Mother) | ___ Foster Parent(s) | ___ Step-parent |
| ___ Parent (Father) | ___ Grandparent(s) | ___ Other: _____ |

Member has ___ Sister(s) & ___ Brother(s). _____ People live in member's house.

Please attach two (2) recent pay stubs and a copy of the most recent W-2 form(s) for each parent/guardian. Application will not be considered without all forms.

- I certify that the information on this application is complete and accurate.
- If the information contained in this application changes (ex. income, employment status...) before or during my child's time in summer camp, I promise to notify the Club no later than 10 days after the change.
- I understand that providing false, incomplete or misleading information may result in:
 - the loss of financial assistance.
 - making me ineligible for receiving future assistance.
 - having to repay the James L. McKeown Boys & Girls Club for any financial aid provided.

Parent/Guardian Signature

Date

*If there are compelling circumstances or important information that you wish to share which would help give us a more accurate and complete picture of your financial situation, please feel free to attach a letter.

*In order to apply for financial aid, a family MUST also complete a full registration packet and pay the \$25 registration fee and \$30/week deposit. Financial aid applications will NOT be considered without the payment or the full application packet.