

**YUGA Leadership Camp
Financial Aid Application**

Financial aid application must be submitted by April 30st.

Please print and complete the entire form

Mail to: Kate Ezzes

Plan USA

Warwick, RI 02886

Or fax to 401-732-0625 Attn: Kate Ezzes

Camper Information

Camper Name _____

Address: _____

City: _____ State _____ Zip Code _____

Phone _____

Income Information

Total annual income of household from all sources (include salaries, wages, alimony, child support, social security, disability, public assistance, ect.)

\$ _____

Number of people supported by this income:

Adults _____

Dependent Children _____

Please explain any unusual family expenses (medical, unemployment, death, emergency situations, etc.)

Applications must include copies of the following:

- 3 recent paycheck stubs and/or other proof of benefit (social security, TANF, etc.)
- Government issued ID or driver's license

This information above is complete and accurate and I understand that it is the only information that will be available to the committee considering this request for financial aid.

If my child does not attend camp and four weeks notice is not given to Plan USA, I understand I am responsible for the full camp fee.

Signature of Parent/Guardian Date