

Family Wellness Financial Aid Request Form: Camp or Program

The Mission of Family Wellness is to inspire healthy lifestyles by connecting people in a fun environment. Complete and submit this financial aid request form to see if you qualify to receive any financial assistance for camps or programs.

How to Apply: Please submit the following

- 1) Camp or program registration form
- 2) Deposit
- 3) Financial Aid Request Form
- 4) Proof/Letter of Qualification of Free or Reduced Lunches from Your School

Mail or bring the completed above items to: Family Wellness
Attn: Camp Scholarships
2960 Seter Parkway
Fargo, ND 58104

Parent's Name: _____ Birthdate: _____ Sex: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent E-mail: _____ Phone: () _____

Spouse/ 2nd Adult: _____ Phone: () _____

List All Persons in Household

Child's Name:	Relationship:	Birthdate:	Sex:	School/College Attending
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Does your child qualify for free or reduced lunches at school? **Yes** **No**

Are there any special circumstances that may qualify your family for a scholarship?
(Medical conditions, life changing events, etc.) _____

Please list the camp or program in which you are requesting assistance: _____

The total amount of the camp(s) that you are requesting assistance for is: \$ _____

How much do you feel that you can pay for the camp or program? \$ _____

Completed form **must** be accompanied by a registration form for the camp you are requesting assistance for and a camp deposit. If you are unable to pay the full amount of the deposit, please call Angie at 701-234-7294 before submitting this form. Incomplete forms will not be processed and your child will not get registered.

Applicant Signature

In completing this application and signing it, I certify that all of the information supplied to Family Wellness is true, accurate and complete to the best of my knowledge.

Signature of Applicant

Date

Please Submit Only One Application Per Family Or Household