

Briefly describe your previous camping experiences, both at NYAC camps and elsewhere.

What do the camper and family expect from this new camp experience?

Are there other household members also attending camp?* List first names and where they are enrolled. *we consider the total number of children per household in lieu of a "sibling discount."

Camper: _____

Camper: _____

Camper: _____

Total number of adults in household: _____ Number of children: _____

Total Monthly Income: \$_____

- Attach copy of tax return form from 2018 ** ***
(1040, 1040A, or 1040 Easy)
**Attach if not on public assistance
***Please omit schedules

Please tell the NYAC Camps Scholarship Committee why this camper is deserving of financial assistance.
Attach another page, if needed.