



Catholic Youth Summer Camp

7881 Bluefield St, Canal Winchester OH 43110 www.cysc.com
Campership Aid Form

NOTE: All information provided in this form will be held in strict confidence.

Biographical Information and Background of Camper/Family

Name of Camper:
Name of Parent/Guardian:
Address:

School:
Phone:
Email:
Name of Parish:

We are seeking financial aid because:

Financial Request: Registration fee for CYSC 2015: \$495/wk

I am able to pay \$ _____ now towards my child's registration and am seeking campership support in the amount of \$ _____ to cover the remaining balance.

Parish Response - To Be Completed by Parish Pastor/Administrator

Dear Parish Pastor/Administrator: The family indicated in this form is seeking financial assistance from Catholic Youth Summer Camp to register their child. Each year, many well-deserving Catholic families approach us requesting financial assistance. Since CYSC is not a profitable venture, we must rely on the generosity of individual donors to meet these requests. We ask that you please help us in better understanding this family's particular need to aid us in the allocation of limited donated funds. If it is also possible that your parish can offer any assistance to the family at this time, we would be grateful for your gift. THANK YOU for your help!

This family is registered and actively involved in parish life: yes no

Reasons you believe this family should or should not be considered for financial assistance: _____

My parish is able to provide financial assistance in the amount of \$ _____ to assist this family.

These funds will be paid as follows: _____

Signature of Parish Pastor/Administrator: _____

Please complete and return to:
CYSC, 7881 Bluefield St Canal Winchester OH 43110