



AMICI CAMPING CHARITY

www.amicicharity.org

2012 RENEWAL Camper Application Form

Please print all information:

Child's Full Name: _____ Camp attended in 2011 _____

Would like to return to this camp in 2012? YES NO

Date of Birth: mm/dd/yyyy: _____ Age as of June 30, 2012: _____

Entering Grade _____ in September, 2012 School: _____

Home Address: number, street, apt.# _____

City: _____ Province: _____ Postal Code: _____

Child lives with: both parents mother father guardian(s) other: _____

Does your child have any special needs and/or physical disabilities? YES NO

If yes, please describe: _____

Is your child currently taking any prescription medication: YES NO

If yes, please describe: _____

How were you referred to Amici Camping Charity? _____

Is your child aware of Amici and our role in sending him/her to camp? YES NO

Please indicate the first year you applied for Amici assistance for your child: _____

Have any other child(ren) in your family and/or household ever received Amici assistance?

YES Name of child(ren): _____ NO

Parent/Guardian Information:

Parent/Guardian 1: First & Last Name: _____

Marital Status: single married common-law separated divorced other: _____

Phone no. (day) _____ (evenings) _____ (cell) _____

E-mail: _____

Parent/Guardian 2: First & Last Name: _____

Marital Status: single married common-law separated divorced other: _____

Phone no. (day) _____ (evenings) _____ (cell) _____

E-mail: _____



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Camp Selection:

What Amici Partner Camp would you most like your child to attend? _____

Which session? _____. Is this a leadership program? YES NO

If yes, what is the name of the program? _____

(please note that Amici cannot guarantee placement of your child at any particular camp)

Is this the same camp your child has previously attended through Amici? YES NO

Please give a brief description of his/her experience at camp last summer:

What is your main concern with your child at this time?

What are your child's main interests?

What are your child's strengths?

What other activities (e.g. camps, sports, trips, etc.) will your child participate in this summer?

Have you or your child applied for summer camp funding from any other sources?

NO YES please list organizations: _____



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Financial & Household Information: (all information is held as strictly confidential)

Please list **all** sources of household income from persons currently living in your home.

<u>Name</u>	<u>Occupation</u>	<u>Place of Employment</u>	<u>Annual Income</u>
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Are you currently receiving financial social assistance? YES NO

If yes, please specify the type(s) of social assistance: _____

and the total amount per month that you receive: _____

Please specify any extraordinary expenses that Amici should be aware of: _____

Annual Pre-Tax Family Income (from all sources)

<\$30,600 _____

\$30,600 - \$37,699 _____

\$37,700 - \$45,699 _____

\$45,700 - \$51,899 _____

\$51,900 - \$58,499 _____

\$58,500 - \$65,099 _____

> \$65,100 _____

Household Members: (please include all persons **currently** living in your home)

<u>Name</u>	<u>Age</u>	<u>Relationship to Camper</u>
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Is there a parent/guardian **outside** the home who is involved with this child? YES NO

Name: _____ Relationship to child: _____

How much contact does this parent/guardian have with this child? _____

Does this parent/guardian provide financial support? YES NO How much? _____



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Renewal surveys:

Please complete **both** feedback forms attached to this application (pages 5 and 6).

Parents/Guardians are encouraged to complete ONLY the "PARENTS/GUARDIANS" SURVEY.

Where possible, please allow campers to fill out the camper survey form on his/her own.

The information provided in the renewal survey does not determine the acceptance of applications. It is intended as a way to gain information about a child's experience at camp and to improve the service that Amici provides.

Acknowledgement:

Amici bases its funding decisions on a number of criteria including, but not limited to, financial need, space availability at partner camps, and the individual child's needs. No one factor is determinative.

If your child is approved for funding, you will be asked to contribute a portion of the camp fee. This amount will be no less than a minimum of \$60.

In accepting Amici's financial assistance in sending your child to summer camp, it is acknowledged and understood that no liability whatsoever shall attach to Amici Camping Charity and its members, officers or directors, for any claims, losses, damages, costs or expenses for personal injury to the health or welfare of your child or death of your child from whatever cause related to or connected with your child's enrollment at camp and your child's participation in any camp activities.

In signing this application, I, the parent/guardian agree to pay any outstanding bills to the camp for such items as tuck, transportation, laundry, etc., which are not covered by Amici (should funding be approved.)

Parent/Guardian signature

Date

Parent/Guardian name (please PRINT)

Child's name

PLEASE RETURN COMPLETED APPLICATION FORMS TO:

Amici Camping Charity
150 Eglinton Avenue East, Suite 204
Toronto, ON M4P 1E8

Tel: 416.588.8026
Fax: 416.486.3854

info@amicicharity.org

www.amicicharity.org



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PARENT/GUARDIAN SURVEY

1. **What were your top three expectations for your child's camp experience in 2011?**

- | | |
|-----------------------|------------------------------|
| ___ Meet new friends | ___ Other |
| ___ Learn new skills | ___ Improved self-confidence |
| ___ Gain independence | ___ Have fun |

2. **Did your child's camp experience this year meet your expectations?**

My expectations were fully met:
 all some (please list) _____ none

My expectations were partially met:
 all some (please list) _____ none

My expectations were not met:
 all some (please list) _____ none

3. **Please describe the impact that camp had on your child. What did he/she learn? How did he/she change as a result of camp?**

4. **Please describe any additional expenses you had as a result of sending your child to camp:**

Clothing: total spent \$ _____ Details: _____

Equipment: total spent \$ _____ Details: _____

Transportation: total spent \$ _____ Details: _____

Tuck shop: total spent \$ _____ Details: _____

5. **We sometimes invite parents and campers to tell donors & volunteers about the impact that camp has had on their lives. These stories help Amici raise funds to send more children to camp in the future. Is this something you/your child would be willing to do?**

I would be willing to write a letter: Yes No My child would be willing to write a letter: Yes No

I would be willing to speak at an Amici event: Yes No

My child would be willing to speak at an Amici event (accompanied by me): Yes No

