



2010 CAMP NOT-A-WHEEZE CAMBERSHIP APPLICATION (FINANCIAL AID)

(All information is confidential, PLEASE contact Kelly Szymanski at 602-258-7505 with any questions!)

Child's Name _____

Name of Parent/Guardian _____

Address _____ City _____ Zip _____

Home Phone: _____ Work Phone: _____

Number of Family Members in household currently _____

Gross Monthly Household Earned Income: \$ _____

Are you currently receiving child support? _____ Yes _____ No

Amount \$ _____

Are you currently receiving alimony? _____ Yes _____ No

Amount \$ _____

Total Family Monthly Income (Gross)
(including all of the above) \$ _____

Total Monthly Household Unearned Income
(Foodstamps, disability, housing assistance, etc.) \$ _____

Total Average Monthly Expenses
(including rent, utilities, food, etc) \$ _____

Average Monthly Medical Expenses \$ _____

Please explain any extenuating circumstances:

I certify that the above information is correct and accurate to the best of my knowledge.

Signature

Date

Please Attach Your Two Most Recent Paystubs to This Application!

CAMPERSHIP APPLICATION INSTRUCTIONS

*Camperships(financial assistance) for children who meet the medical criteria and are accepted to Camp Not-A-Wheeze are available based on the financial needs of the family. Full and partial campership amounts will be awarded based on the financial needs of each family individually. The system of determining need is based on standards used by other special needs camps in Arizona. It is not the intent of the **American Lung Association of Arizona** to turn away any child from camp due to their financial situation, but rather to allocate our limited resources so that as many requests as possible can be met. Every effort is made to see that all eligible children attend camp.*

- Step 1** Complete the attached Campership Application form.
- Step 2** **Attach copies of Your Two Most Recent Paystubs to Application (Must be included for Application to be processed)**
- Step 3** Return the Campership Application form to the **American Lung Association of Arizona (ALAA)** along with your **2010 Camp Not-A-Wheeze Application and your \$50 deposit by April 15, 2010.** *(Applicants will be notified of campership awards with a letter of acceptance to camp.)*

Return completed forms to:

**American Lung Association of Arizona
Camp Director
102 W McDowell Road
Phoenix, AZ 85003**