



www.susquehannock.com

866-482-2677 • 570-967-2323

Dear Parent/Guardian

The time has come once more to enroll your child for camp. Each year, our scholarship program becomes more popular and our number of applications keeps increasing. In order to ensure your child is able to reserve their spot at camp, we need you to fill in the attached forms and mail them back to us by January 15th, 2013.

Please note that returning applicants are not assured of a scholarship for 2013. We do need to reassess each case on a yearly basis to ensure that your child still qualifies within our scholarship program. It is thus crucial that you send in your completed application on time. If we do not receive your application by January 15th, 2013, we will assume you do not intend for your child to come to camp in 2013.

The first thing you need to do to apply for a scholarship for 2013 is to send us your **fully completed** application form accompanied by a \$100 application fee. If there is no application fee, we cannot process your application. If your application is accepted, the fee will be credited towards tuition. If your application is not accepted, the fee will be **returned in full** to you. If, however, you withdraw your application after May 1st, 2013, your application fee will not be refunded. If you need us to hold off depositing a check until after the holiday season, please let us know.

We will let you know on or before February 15th, 2013 whether you will be awarded a scholarship to attend Camp Susquehannock in 2013 or not. If you are granted the scholarship, and for any reason your child is unable to attend camp, please let us know immediately so we may use that scholarship to benefit another child.

If you have any questions, please do not hesitate to call us.

Regards
The Camp Susquehannock Scholarship Committee

Camp Susquehannock was founded in 1905 and is a not-for-profit summer camp.



2308 Tripp Lake Road, Brackney, PA 18812



Camp Susquehannock 2013 Scholarship Camper Application

Mail to: Camp Susquehannock 2308 Tripp Lake Road, Brackney, PA 18812

A registration fee of \$100.00 must accompany this application to begin the process.

Please make check payable to "Camp Susquehannock, Inc."

If applicant is accepted, the fee will be credited toward tuition. If the applicant is not accepted, the fee will be returned.

Application deadlines: Returning applicants – January 15th, 2013 (you will be told by February 15th, 2013 if you are accepted)

New Applicants – March 1st, 2013 (You will be told by May 1st, 2013 if you are accepted)

Please Print

_____ Male Female
Full Name of Camper (Last, First) Nickname

Date of Birth (MM/DD/YYYY) School Attending Grade completed by July 1, 2013

Race (Optional): African American Asian Caucasian Hispanic Other _____

Does camper have previous camp experience? Yes No

Name of camp _____ # of years attended _____ Overnight or Day? _____

_____ Name of Parents/Guardians

_____ Home Address City State Zip

_____ Home Phone Camper's Email

_____ Parent/Guardian's Cell Phone(s) Parent/Guardian's Email

Camper resides with (please check which ever is appropriate)

Both parents Father Mother Other (please specify) _____

Family Dynamic

Father Deceased Mother Deceased Parents Divorced Parents Separated One parent unable to work

Mother/Female guardian's Occupation: _____ Current Salary: \$ _____

Father/Male guardian's Occupation: _____ Current Salary: \$ _____

*IF CHILD IS SUPPORTED BY TWO PARENTS/GUARDIANS, INFORMATION FOR BOTH **MUST BE FILLED OUT***

Registration fee Enclosed: \$ _____ Additional amount of you can contribute towards camp tuition: \$ _____ ?

If camper receives a partial scholarship, who will be responsible for Camper's bill:

_____ Name Relationship to Camper

_____ Address City State Zip

_____ Home Phone Work Phone Cell Phone

If camper is being sponsored:

Name of school or organization sponsoring you: _____

Phone #: _____ Contact Person: _____

Dates:

Please note the dates of camp sessions in 2013 and list your *first* and *second* choices. ***Applicant must remain flexible for either session.***

June 23 (Sunday) to July 16 (Tuesday) _____, or July 18 (Thursday) to August 10 (Saturday) _____, or both needed _____

Your application is not complete without a copy of your most current Tax Return form and all pertinent schedules (i.e., itemized deductions, business gains/losses, etc.). Please also provide the figures below:

Adjusted Gross Income: \$ _____

Taxable Income: \$ _____

Child Support: \$ _____ (Annual/Monthly) Monthly Government Assistance: \$ _____

Home: Own Present Market Value: \$ _____

Unpaid Mortgage: \$ _____

Rent Annual Rate: \$ _____

Please give the information below for **all dependent children**:

<u>Name</u>	<u>Age</u>	<u>Name of School</u>	<u>Public/Private/College</u>	<u>Tuition/Year</u>	<u>Assistance</u>

How much did you spend for education this school year? \$ _____

Are you sending other family members to camp? Yes No

Name of camp(s): _____

Cost: \$ _____

THIS IS VERY IMPORTANT! The Scholarship Committee ***MUST*** understand your need for financial assistance. If you have extraordinary expenses, either on-going or one-time or someone is out of work or you are planning for a future expense, we need to know to best assist you in this summer's camp experience. Use another page, if necessary.

Describe any extraordinary expenses and your need for aid at this time:

Does your child work/play well with others? Own age? Older? Younger?

Describe your child's personality _____

What is the main purpose in sending your child to Camp Susquehannock? _____

Is there any special sport or activity you wish to have emphasized? _____

Does your child have any special interests, aptitudes or abilities? _____

Please note any other special information that we should be aware of including special needs (i.e. medical issues, allergies, and/or social/physical conditions that require attention). Please check:

- Medical Condition Life threatening allergy Mild allergy Medication Other

Please comment:

Camper wears what size t-shirt? Youth Medium Youth Large Adult Small Adult Medium Adult Large
 Adult X-Large

If Roman Catholic, do you wish your child to attend weekly Mass? Yes No

An Emergency Contact (other than Parent/Guardian): _____

	Name	Relationship to Camper

Address	City	State

Home Phone	Work Phone	Cell Phone

(NEW applicants only) Please provide us with 3 references for your child. This should be someone that knows your child well and has seen them in a social setting. At least one reference must be a teacher. Other good examples include a coach, a community leader etc.

1. Name of reference _____ Knows child from: _____
 Known child for how long: _____
 Contact phone number _____

2. Name of reference _____ Knows child from: _____
 Known child for how long: _____
 Contact phone number _____

3. Name of reference _____ Knows child from: _____
 Known child for how long: _____
 Contact phone number _____

Optional Programs you can enroll your child in and pay for in full by May 31st, 2013:

We accept VISA, MasterCard, Discover, Money Orders and checks made payable to Camp Susquehannock Inc.

Horseback Riding (Offered at \$45.00 per lesson.)

Full Season (20 lessons)	<input type="checkbox"/> \$900.00	Full Season (32 lessons)	<input type="checkbox"/> \$1440.00
First Session (10 lessons)	<input type="checkbox"/> \$450.00	First Session (16 lessons)	<input type="checkbox"/> \$720.00
Second Session (10 lessons)	<input type="checkbox"/> \$450.00	Second Session (16 lessons)	<input type="checkbox"/> \$720.00
Intro Session (6 lessons)	<input type="checkbox"/> \$270.00	Intro Session (12 lessons)	<input type="checkbox"/> \$540.00

*Does camper have parent permission to jump? YES NO *(subject to approval of the instructor)
 Does your child have previous riding experience? YES NO If yes, please describe _____

Tutoring (Offered at a rate of \$45.00 per lesson for each subject). Select a maximum of two from the following subjects: Math (Specify course and level), Language Arts (Specify: Grammar, Writing, Conversation, Reading) Spanish, or ESL – English Second Language (only offered 3x/week). Other subjects MIGHT be available upon request. (We strongly suggest that first time campers who do not speak English as their first language, should sign up for ESL)

First Named Subject: _____ Second Named Subject: _____

Number of lessons listed in () next to price

Full Season	<input type="checkbox"/> \$900 (20)	<input type="checkbox"/> \$1440 (32)	Full Season	<input type="checkbox"/> \$900 (20)	<input type="checkbox"/> \$1440 (32)
First Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)	First Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)
Second Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)	Second Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)
Intro Session	<input type="checkbox"/> \$270 (6)	<input type="checkbox"/> \$540 (12)	Intro Session	<input type="checkbox"/> \$270 (6)	<input type="checkbox"/> \$540 (12)

Transportation: Please CIRCLE the dates needed. ALL CAMPERS ARE EXPECTED TO ARRIVE ON DATES INDICATED BELOW. IF OTHER DATES ARE NEEDED, PARENTS MUST MAKE ALL NECESSARY ARRANGEMENTS.

Venue	Arrival	Departure	Session	Cost
To/From Plymouth Meeting Mall	Sun 6/23	Sat 8/10	Full	\$50.00 each way
To/From Plymouth Meeting Mall	Sun 6/23	Tues 7/16	1	\$50.00 each way
To/From Plymouth Meeting Mall	Thurs 7/18	Sat 8/10	2	\$50.00 each way
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Sun 6/23	Sat 8/10	Full	\$40.00 each way
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Sun 6/23	Tues 7/16	1	\$40.00 each way
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Thurs 7/18	Sat 8/10	2	\$40.00 each way
International Flights To/From Newark	Sat 6/22	Sat 8/10	Full	\$150.00 each way
International Flights To/From Newark	Sat 6/22	Tues 7/16	1	\$150.00 each way
International Flights To/From Newark	Wed 7/17	Sat 8/10	2	\$150.00 each way

*PLEASE NOTE FOR PLYMOUTH MEETING MALL PICK UP/DROP OFF - ALL BAGGAGE MUST BE SENT TO/FROM CAMP, PRIOR TO ARRIVAL.

Campteen: We also have a store at camp and campers have an account set up in their name. They can purchase items such as toiletries and camp clothing.

If paying with credit card, please fill in information below.

<input type="checkbox"/> VISA	<input type="checkbox"/> Discover	<input type="checkbox"/> Master Card
Account Number:		Expires:
Amount:		Authorized Signature:
Cardholder's Name:		
Billing Address for card:		

Authorization, Release and Waiver:

I hereby give permission for my child to participate in all regular camp activities and programs including out-of-camp trips. I authorize Camp Susquehannock, Inc. to use photographs and video media of my child as may be needed for its records or public relations programs.

The first \$200.00 is a non-refundable administrative processing fee. All other payments are refundable before May 1, 2013. Payment in full must be received prior to admittance. Medical information and releases are also required to be submitted prior to admission. If a camper arrives late, leaves early or is dismissed for any reason, there will be no refunds. There are additional charges for extra days and airport transportation, bedding, tutoring or riding.

I further assume all risk of, and hold harmless and do hereby release, discharge Camp Susquehannock, Inc., its directors, officers, agents and employees from and against all liability for loss, damage, injury, or illness to the camper or his/her property relating to or deriving from his/her presence at or travel to or from, the Camp Susquehannock Inc. from whatever cause except for gross negligence or willful misconduct.

I have read and understand the contents of this authorization, release and waiver including payment, refund and cancellation policy and intend to be legally bound hereby.

Signature of Parent/Guardian _____ Date _____

Reminder:

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For CSI Office Use Only:	
Date Application received: _____	
Application fully completed: Yes No	Registration fee enclosed: Yes No
Date informed that application was received: _____	
Date(s) references contacted: 1. _____ 2. _____ 3. _____	
Date informed of application status: _____	