



CAMP PEMIGEWASSETT

FINANCIAL AID APPLICATION

To be considered for financial aid, please:

- 1) **Complete this form.** We want to understand why you are requesting aid! If there are other details or circumstances you would like us to consider, you may include them on a separate sheet.
- 2) **Attach a copy of Page 1 of your most recent federal Tax Return (IRS Form 1040).**
- 3) **Submit your application and materials to Kenny Moore at ken@camppemi.com.**

Applications are considered on a first-come, first-served basis.

(optional) Yes, please also share this Financial Aid Application with the Fred Rittner Pemi Campership Fund (Rittner Fund) for consideration of additional scholarship monies (visit www.rittnerfund.org).

1. CAMPER INFORMATION (please submit only one application per family)

Camper Name *Birthdate* *Years at Pemi*

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2. FAMILY INFORMATION

Total number of dependent children: _____ Ages: _____

Parent Name 1 *How do you know about Pemi?*

Home address

Home Phone *Work phone* *Email address*

Employer / Company Name *Position* *Years/Months employed here*

Parent Name 2 *How do you know about Pemi?*

Home address

Home Phone *Work phone* *Email address*

Employer / Company Name *Position* *Years/Months employed here*

3. MONTHLY EXPENSES:

\$ _____ Rent/Mortgage

\$ _____ Childcare expenses

\$ _____ Medical expenses (after insurance)

\$ _____ Education expenses (*please describe*):
 1. _____
 2. _____

\$ _____ Debts or Loan Payments (*please describe*):
 1. _____
 2. _____

\$ _____ Other Fixed expenses (*please describe*):
 1. _____
 2. _____

\$ _____ Other extraordinary expenses (*please describe on a separate sheet*)

\$ _____ Total Monthly Expense

4. INCOME & OTHER ASSETS:

\$ _____ Total Monthly Income (after taxes), from all supporting parents or guardians.
Please include income such as: salary, rental income, child support or aid for dependents, alimony, public assistance/benefits, social security, and unemployment.

\$ _____ Do you hold other significant assets, such as property other than your primary residence? (circle one) YES NO *If yes, please indicate approximate value and describe: _____*

Are other external or family sources of funding available to you? (circle one) YES NO

If yes, please describe these circumstances: _____

5. FINANCIAL AID: We care deeply about providing the benefits of a summer at Pemi to as many families as possible. Please ask only for what you truly need.

Pemi session/s (circle): Full Session 1st Session 2nd Session 16's Program

\$ _____ Total Monthly Income after Monthly Expense (discretionary income)

\$ _____ Total cost of Pemi tuition

\$ _____ Amount you can pay toward Pemi tuition

\$ _____ Difference between tuition and your ability to pay (request for financial aid)

I (we) declare that the information reported on this form, to the best of my/our knowledge and belief, is true, correct, and complete, and presents an accurate representation of our financial circumstances.

Signature of Parent/Guardian 1 Date Signature of Parent/Guardian 2 Date

SIGNATURES OF ALL PARENTS/GUARDIANS ARE REQUIRED