

2021 WWP North Athletic Camps Financial Assistance Application For Sports Camps

Sponsored in conjunction with the Plainsboro Department of Recreation & Community Services

Complete Application (print or type) and return to:
Plainsboro Recreation & Community Services Department
641 Plainsboro Road, Plainsboro, New Jersey 08536

This financial assistance application is for sport camps for children living in the WW-P School District. **Sports camps require a \$10 non-refundable application fee per child / per camp and any related registration fees.** Submit your application for financial assistance as early as possible; space is held in the camp pending a decision on your application. You may be assisted with a partial scholarship (50%) towards the camp(s) fee(s). Balance of camp fees must be paid in the Recreation & Community Services office prior to the start of each camp (cash only).

Part I Applicant Information

Name of Applicant (Adult) _____ Relationship to participant: Parent Guardian Other
Address _____ City _____ State _____ Zip Code _____
Phone: (Day) _____ (Evening) _____
Email _____ Number of residents at this address? Adults _____ Children _____

Part II Participant / Camp Information

1. Child's Name _____ Upcoming Grade Level _____ School Name _____
2. Child's Name _____ Upcoming Grade Level _____ School Name _____
3. Child's Name _____ Upcoming Grade Level _____ School Name _____
4. Child's Name _____ Upcoming Grade Level _____ School Name _____

Summer Camps / Clinics you are applying for:

Each camp carries a \$10 per child/per camp fee and a registration fee. For each camp you are registering for, write each child's number (use number next to name above) next to each camp. If more than one child is attending the same camp, write both numbers.

Ultimate Girls B-Ball (Grades 4-9) 6/28-7/2 (\$150)

Part II Participant / Camp Information

Is child(ren) enrolled in free or reduced lunch program? _____

Does any member of the household receive other subsidies or assistance? If yes, please list _____

Please attach proof of Public Assistance to this application. Campers from households that provide proof will receive 50% reduction on camp fees for all listed camps provided by West Windsor-Plainsboro North Athletic Camps Association.

The information I have provided in this application is accurate and complete to the best of my knowledge. I accept responsibility for said information, and will supply additional documentation for verification. I understand that submission of this application does not guarantee tuition assistance or space in any program. Should I receive tuition assistance, it is understood that I am responsible for the balance of all program fees.

Adult Applicant Signature _____ Date _____