

Summer Camp Location:
Afterschool Location:

## **Financial Assistance Application**

## 2021-2022

While the Boys & Girls Clubs of Oceanside's mission is to serve those that need us most, by working diligently to provide programs at free and reduced rates that are affordable to the families we serve, financial assistance is available to those who may be unable to afford the programs offered at a fee. Assistance is awarded based on each applicant's ability to pay, the National School Lunch Program (NSLP) guidelines and the amount of "scholarship" funds available at the Club. Financial assistance is awarded on a first-come, first-serve basis at the beginning of summer to be applicable through the fiscal year: please submit requests as soon as possible.

Incomplete requests will not b INCLUDE:	e processed	d, <b>BEFORE</b>	RETURNING YOUR PACKET,	, please be sure to
( ) 2020-2021 Membership A	pplication,	\$55 Annua	al Membership Fee	
( ) Signed Financial Assistance	e Applicatio	on <i>(this coi</i>	mpleted application)	
( ) Signed letter of Notificatio	n from Sch	ool Distric	t for Free/Reduced Lunch <u>O</u>	<u>R</u>
( ) Previous Year Income Tax	Returns an	d 30 days	Income Verification (paystul	bs, letter from employer)
(Cabalanahina anantan fan anana	6		r BGCO camps, NOT applicable for	turnes autobies (C. den united)
•			nain confidential, but will no	
аррис	ant's respo	νηςισιπτή το	o provide BGCO with copies <sup>*</sup>	
•				
Eamily Information				
Family Information				
			  Primary Conta	 uct Number
			 Primary Conta 	nct Number
Family Information  Parent/Guardian Full Name  Home Address			Primary Conta  City/State/Zip	<del>-</del>
Parent/Guardian Full Name Home Address			City/State/Zip	<del>-</del>
Parent/Guardian Full Name Home Address Employer	yourself, liv	ving in the	City/State/Zip Work Phone	<del>-</del>
Parent/Guardian Full Name Home Address Employer	yourself, liv	ving in the	City/State/Zip Work Phone	<del>-</del>
Parent/Guardian Full Name  Home Address  Employer  List all dependents , including			City/State/Zip Work Phone household:	
Parent/Guardian Full Name  Home Address  Employer  List all dependents , including			City/State/Zip Work Phone household:	
Parent/Guardian Full Name  Home Address  Employer  List all dependents , including			City/State/Zip Work Phone household:	
Parent/Guardian Full Name  Home Address  Employer  List all dependents , including			City/State/Zip Work Phone household:	
Parent/Guardian Full Name  Home Address  Employer  List all dependents , including			City/State/Zip Work Phone household:	



## **Financial Information**

Parent Called

Annual Household In	ncome
( ) Wages/Salary ( ) Child Support ( ) Unemployment ( ) Disability	( ) AFDC ( ) Retirement ( ) Social Sec. ( ) Other:
best of my knowledge and that I will notify the the eligibility guidelines and the commitment	the Boys & Girls Clubs of Oceanside is accurate to the e BGCO immediately should anything change. I understand I am making by accepting financial assistance from the ation, continuous late payments or NSF's may become e.
Signature of Applicant	 Date
	arship Program is made available through the generosity of our donors.
	nerous contributors who make our programs possible.
FREE School District Lunch REDUCED School District Lunch	m matches the NSLP Income Eligibility Guidelines:  = 30% BGCO Scholarship Award  ch = 20% BGCO Scholarship Award  aluated on an as needed, case by case basis)
	eds the amount granted by the Boys & Girls Club, we g partners for Alternative Payment Reimbursement in San
Child Development Associates CDASanDiego.com (619)427-4411	
YMCA Child Care Resource Services Childcaresandiego.com (800)521-0560	
	ministrative Use Only ** N()School Lunch Letter Y()N()Financial/Income Info

\_ Letter Sent

\_ Entered in System