



## FINANCIAL/SCHOLARSHIP APPLICATION FORM – 2020

It is our goal to ensure that cost of camp is not the reason that any camper would not come to a session at Camp Nutimik. We require the full fees of each camper to cover the costs of running our summer program, however, we strategically fund-raise and seek out grants to help us reduce the direct cost to each camper. We understand that there are situations where families simply cannot afford camp. We do have some financial or scholarship funds available for those families who simply cannot afford the cost of the camp session and will work with you in a way that your child can attend camp.

All parts of this application must be completed. Your request for funding will not be considered if the application is not completed.

We are an accredited camp with Manitoba Camping Association and funding from the MCA Sunshine Fund is available to campers who are in need of financial assistance. **If you have not yet applied for funding from the Manitoba Camping Association Sunshine Fund, please do so before proceeding with the application for funding from Camp Nutimik.** The Sunshine Fund can be directly accessed at: <https://www.mbcamping.ca/sunshine-fund>.

If funding is not approved by the MCA Sunshine Fund, please complete the balance of this application.

**Result of Sunshine Fund Application**     Funding Approved     Funding not Approved

**Date of response from Sunshine Fund:** \_\_\_\_\_

**Please enter the first parent's/guardian's name; occupation and name of employer:**

_____	_____	_____
Name	Occupation	Name of Employer

**If applicable, please enter the second parent's/guardian's name; occupation and name of employer:**

_____	_____	_____
Name	Occupation	Name of Employer

**Has your family received campership assistance from Camp Nutimik in prior years?**     Yes     No

Please indicate the year(s) of prior assistance if applicable: \_\_\_\_\_

Please indicate the level of assistance received if applicable: \_\_\_\_\_

**How many income-contributing individuals make up your household:**

0     1     2     3 or more

**Please select the range that accurately reflects your family's annual income:**

0-20,000     20,000 – 30,000     30,000 – 40,000     40,000 – 50,000     50,000 – 60,000  
 60,000 – 70,000     70,000 – 80,000     80,000 – 90,000     90,000 – 100,000

**How many dependents are there in your primary household?** \_\_\_\_\_

**How much can you afford to pay for your child's time at camp?** \_\_\_\_\_

*We normally require a minimum parental contribution of \$75.00.*

**Describe the financial circumstances surrounding this request for financial assistance:**

**What do you hope for your child to gain from attending camp?**

**Total family income** (Please provide total family income per month) \_\_\_\_\_

**Total family expenses** (Please provide total family expense per month) \_\_\_\_\_

**Please return this campership/scholarship application to:**

Camp Nutimik  
Attn: Executive Director  
Box 35040, RPO Henderson  
Winnipeg, MB  
R2K 4J9

***We will be in contact with you concerning our ability to assist with the campership request.***