



**Confidential Application for Financial Assistance - Page 2**

Has your child ever attended summer camp? \_\_\_\_\_ If so, where/when? \_\_\_\_\_

What benefits do you see in having this financial assistance to allow your child(ren) to attend Camp Wewa?

Has your child expressed interest in attending camp? \_\_\_\_\_

How much of the above cost would you be able to pay, if any? (We understand some families can't participate at all, but for those who feel they can, doing so allows us to sponsor more campers, in addition to helping your child.) \_\_\_\_\_

Your present total household income level is:

- \_\_\_\_\_ Under \$25,000
- \_\_\_\_\_ \$25,001 to \$40,000
- \_\_\_\_\_ \$40,001 to \$60,000
- \_\_\_\_\_ \$60,001 to \$80,000
- \_\_\_\_\_ more than \$80,000

Which Wewa session would you be interested in for your child? Please number in order of preference, 1-4 (1 being your first-choice week, 4 being your least-preferred week. If your child is not available to attend a particular session, please mark with an 'X.')

- \_\_\_\_\_ June 30 - July 5, 2024
- \_\_\_\_\_ July 7 - 12, 2024
- \_\_\_\_\_ July 14 - 19, 2024
- \_\_\_\_\_ July 21 - 26, 2024

Thank you for your time and thank you for advocating for your child!

*If you have any questions or concerns about the application process or anything else regarding our Fund, please email [info@jwcampfund.org](mailto:info@jwcampfund.org) or call Brandy at 310-562-7213.*