



# **2022 Camp Subsidy Application Form**

## **Section 1: Camper Information**

First Child Inform				
Child's Last Name:_		First	t Name:	
Address:		City:		Postal Code:
□ Male □ Female	Birthdate: Day	Month	Year	
-	re you have registered pplication will be place			fore submitting your Sunshine Fund gistered.
For a list of eligible	camps please visit our v	website at <a href="http://">http://</a>	www.mbcamping.ca	1
Accredited Camp: _		Camp Session:		Camp Date:
Camp Cost : \$	Transportation	ı cost: \$	Total GST:	Total fees owed: \$
Special needs if any	<i>r</i> :			
Second Child Info		First	· Name·	
Address:		City:		Postal Code:
□ Male □ Female	Birthdate: Day	Month	Year	
•	re you have registered pplication will be place	• •	•	fore submitting your Sunshine Fund gistered.
For a list of eligible	camps please visit our v	website at <a href="http://">http://</a>	www.mbcamping.ca	<u>.</u>
Accredited Camp: _		Camp Session:		Camp Date:
Camp Cost: \$	Transportation	cost: \$	Total GST:	Total fees owed: \$
Special needs if any	/:			





### **Section 2: Parent Contribution**

• Your application will be placed on hold until your parent contribution is received.

A <u>mandatory</u> parent contribution equal to 20% of the total camp cost (including transportation & GST) to help us send your kids to camp is required and must be sent in with your application.

\*For example: Camp registration fee (including GST)= \$400, Transportation = \$50, Total Fees = \$450 Parent Contribution =  $$450 \times 20\% = $90.00$ 

Total camp fees (includ	ing transportation & GST): \$		
Parent contribution (to	tal camp fees x 0.20): \$	\$140 maximu	m per child is required.
	)Cheque/Money Order (Payable Cash		d) – Post-dated cheques are accepted up epted)
Name as it appears on	credit card:		
Card #:			Expiry Date /
Signature authorizing c	redit card payment:		
	Sponsor/Guardian Infor dian/sponsor will act as the co		nild and will receive all correspondence.
Last Name:		_ First Name:	
Address (ONLY if differen	ent from Child's):	City:	Postal Code:
Phone #: (Home)	(Work)	(Cell)	Email:information on the application form.
O I give permission to	use my email for receipt of futu	re newsletters and/or	information on the application form.
Relationship to child (i.e	e. Parent/Sponsor/Guardian/otl	her):	
Section 4: Manito	ba Health Card		
	f your Manitoba Health Card wi ousehold. If children appear on	, ,,	ne Health Card must list all parents and Cards, please submit both.
	our household:		
Number of dependent of Total gross household i	children in the family:		
Total gross household l	ΠCOITIE. \$		





## **Section 5: Financial Information**

Applicants are required to pr For income cut-off please sec		nentation verifying economic need.
		income and number of family members. Assessments of financial
need will be based on gross i	~	,
Please check all appli	cable boxes:	
○Single Parent		Social Assistance
Refugee Claimant	•	ner/self-employed ( <b>more information may be</b> will be contacted)
The following are accepted d	ocuments verifying i	ncome:
<ul> <li>Notice of Assessment</li> </ul>		
		oth spouses Notice of Assessment from previous tax year
If you are on social assistance		
<ul> <li>Government budget :</li> </ul>		
If you are a refugee claimant		and a
<ul> <li>Government proof of</li> </ul>	refugee status in Car	1ada
Section 6: Letters		
Dlacca include a latter or dray	wing from your shild!	shildren avalaining why they would like to go to some or the
	- '	children explaining why they would like to go to camp or the parent may write a letter as well.
		inces of receiving Sunshine Fund subsidy. We operate on a first come
first serve basis.	way impact your cha	inces of receiving Sunstime Fund Subsidy. We operate on a first come
inst serve basis.		
Here are some subjects you o	or your children may t	alk/draw about:
If you have been to come and the company of th		
<ul><li>What have you</li></ul>	ou learned?	
<ul> <li>How has cam</li> </ul>	ιρ benefited you in a ι	unique way?
<ul><li>Why is camp</li></ul>	important to you?	
<ul> <li>If you have never bee</li> </ul>	en to camp:	
<ul><li>Why are you</li></ul>	excited for camp?	
<ul> <li>If you are a parent of</li> </ul>	a child who has atter	nded camp:
<ul><li>What is the g</li></ul>	reatest change you h	ave noticed about your child since returning from camp?
<ul> <li>If you are a parent of</li> </ul>	a child who has neve	r attended camp:
<ul> <li>Why do you vertex</li> </ul>	want your child to exp	perience camp?
Free Press Interviews: The W	linningg Free Dress nu	ublishes articles on families who access the Sunshine Fund to help
	, -	noney to send kids to camp. Please indicate if you and your family
would like to be interviewed.	•	oney to send kind to camp. Heade maleate if you and your failing
		reviously? \ightarrow No thank you \ightarrow I would like more information
•	•	





### VERY IMPORTANT INFORMATION:

- 1. Please note that we are a registered charity reliant on public donations and can only subsidize children if our funding allows. Submitting this application DOES NOT guarantee funding.
- 2. If the Sunshine Fund approves you for camp subsidy you will be notified via **email**. If you do not have email, please ensure you leave a **valid telephone number** where a message can be left for you. Until you receive an official Sunshine Fund approval, you will not be receiving funding.
- 3. Should you choose to send your children to camp without approval, it becomes your responsibility to cover the camp fees. The Sunshine Fund cannot reimburse camp fees to any camper that has already attended camp.
- 4. Your Sunshine Fund application will only be processed at the Sunshine Fund office once **ALL** of the required documentation has been submitted. The 2022 Sunshine Fund application has a 20% mandatory parent contribution requirement, up to a maximum of \$140.00 per child.
- 5. We will update you as soon as we can. You may call to confirm that we have received your application, however; we **WILL NOT** respond to inquiries about the status of your application unless you haven't heard from us one month prior to the camp start date.
- 6. You must contact the camp directly regarding any questions about the actual camp or its programs.

#### Section 7: Checklist

to the aforementioned use of personal information.

Application Checklist (We cannot approve subsid	dy without a completed application)				
Camp registration form sent directly to camp					
Camp information (including camp, camp date	es, & total camp costs) correctly filled out on Sunshine Fund application				
O Parent contribution towards this camp experie	ence (20% of the total camp cost)				
A copy of your Manitoba Health Card					
O Notice of Assessment for Income verification					
A letter or drawing indicating how a camp experience will impact your child (parent or child can write the letter)					
Completed applications may be mailed, faxed, em	nailed or dropped off in person. There is a locked drop box at our front				
door where applications can be left. Contact us a	it:				
<b>Manitoba Camping Association &amp; Sunshine Fund</b>	1				
1215 Henderson Hwy – Unit F, Winnipeg, MB, R	2G 1L8				
Phone: (204) 784-1130; Fax: (204) 784-4177					
Email: sunshinefund@manitobacamping.ca					
Parent/Guardian Signature:	Date:				
Information collected for all applicants is stored a	and used by the Manitoba Camping Association's employees and/or				
volunteers to facilitate the Sunshine Fund (SF) and	d to administer the policies that govern the Association in accordance				
with the Privacy Act. The Manitoba Camping Asso	ociation (MCA) does not share the information we collect outside of our				
Association. Letters/drawings submitted will remo	ain the property of the MCA/SF and may be used for promotional				
purposes as a means to solicit donor funding. Sign	nature above indicates understanding and agreement with the respect				