



Financial Assistance Application Packet

Each year, generous donors give anonymously to our Annual Campaign to support deserving children and their families with the opportunity to attend YMCA Camp Cosby.

Every application is reviewed individually and confidentially by our caring Scholarship Review Committee in order to determine the best use of funding and award amounts.

Anyone may apply! We're here to help! If you have any questions regarding our Financial Assistance programs or just want to find out if you can qualify, please contact us by phone (256)268-2007 or email us: cosby@ymcabham.org.

Programs Available

Financial Need:

Anyone may apply for this program, regardless of financial need. Applications are reviewed and qualified based on household income, number of household members, family situation, amount requested, and financial documentation. We are here to help find a way to help any child attend camp, regardless of financial ability to pay. The YMCA of Greater Birmingham/YMCA Camp Cosby commits to maintaining confidentiality for those that who apply and receive support from our scholarship program. More details inside!

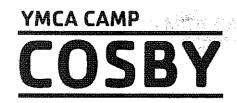
Foster Care Initiative:

The Foster Care Initiative is a scholarship program designed specifically for families who have Foster/Foster-to-Adopt Children in their care. It provides a fully funded tuition scholarship for your foster/foster-to adopt campers to attend YMCA Camp Cosby. More details inside!

NEW!! Leadership Scholarship:

Campers (Rising grades 4-11) who participate in school or community programs that require service hours, leadership training or who may desire to work at Camp Cosby as a counselor in the future are encouraged to participate in this scholarship program. All applications require an essay submission from the camper, along with the Financial Assistance application. More details inside!

**All Scholarships are awarded based the availability of YMCA funds raised. Special consideration is given to each application and program selected.



Leadership Scholarship Application

Please download and print all pages of this packet.

Please print clearly in dark ink.

Please be sure to provide Camper name(s)/Parent name on all forms submitted.

IMPORTANT: Incomplete applications will not be processed until all required documents are received.

Complete application packet should be submitted to: cosby@ymcabham.org

If you need to mail the application packet:

YMCA Camp Cosby
Attn: Camp Registrar/Financial Assistance
2290 Paul Bear Bryant Rd.
Alpine, AL 35014

YMCA Camp Cosby Scholarship Application

Please complete and return to cosby@ymcabham.org Please print clearly in black ink. If any portion of the application does not apply, please either leave it blank or put N/A. (Required for all programs)

Program Selection: (Circ	le at least one)	
Financial Need	Foster Care Initiative	Leadership Scholarship
		DOB:Gender:
		State: Zip:
Phone #1 (cell/home):	Phor	ne #2 (cell/work):
Marital Status:	Number of Depende	ents: Total # in Household:
Employment Information: Employer: Employer Address:	#Years_	Position Pos
City:	State: Zip:	Phone:
E-mail:		
Please complete if applica		
Spouse's Name: Employer:	#Years: Position:	Age: Factions : Employed Advisor.
Linployer Madress.	·	Phone:
Email::		
Enrollment Status: Part time		e education financial assistance? your household:
First/Last Name (s)	Date of Birth Age //	School Name Current Grade
Scholarship Applied for: S	ummer Camp/Winter Camp (circle	one)
Preferred Session(s):	Date(s):	Registered for camp?
How much can you afford	to pay <u>per child</u> toward Camp Co	osby Programs?
-		ъ.

Parent Perspective Essay

Use this space for the Parent Perspective Essay (Leadership Scholarship) or use your own paper or form—either is acceptable, but please be sure camper name/parent name is provided.

Please type or print clearly using dark ink.

Parent Name/Date	 	
Camper Name(s)		
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^{*}Please print additional pages as needed.

YMCA OF GREATER BIRMINGHAM

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PHOTO/STORY RELEASE

I hereby (circle one) consent/do NOT consent to and authorize the use and reproduction of any and
all photographs, video footage and testimonials taken of me/my family for YMCA promotional
purposes. I understand I will receive no financial reimbursement for the use of these items.

Parents (printed) n	ame
Parents Signature	Date:

Please complete ONLY this information:	्राम्य देश के विकास के जिल्ला है जिल्ला जिल्ला के जिल्ला है
Parent Last Name/First Name:	
Camper Last Name/First Name:	
Program Selection: (<u>Circle at least one</u>)	
Financial Need Foster Care Initi	ative Leadership Scholarship
FOR OFFICE USE ONLY:	
Branch: Camp Cosby	Date App Received for Review:
- 1985년 - 198 - 1985년 - 1985	Submitted by:
Application Packet Complete: Yes No	ន ទី១ ១៩ ១ និង ១៩៩ ៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩៩
Documents Missing:	
Documents Missing: by Initials:	
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Date notified: by Initials:	Program Type:
Date notified: by Initials:	Program Type:Award Date:
Approved Level % Payment plan \$	Program Type: Award Date: Date

Date Award Email Sent: ______ by Initials: _____