



Shine On

YMCA Camp Financial Assistance Application

YMCA Camps provide life-changing experiences. Friendships blossom, self-confidence emerges, independence grows - and through it all our campers build resilience to help them face new challenges.

We are committed to eliminating financial barriers and providing everyone with the opportunity to experience YMCA Camps. By accessing YMCA Camp Financial Assistance, your child will be able to participate at a reduced rate.

HOW IT WORKS

- The program is for children between 5 and 12 years of age.
- Children 5 years old must have attended school in the 2024-2025 year.
- Applications will be approved only as long as the criteria are met and funding is available.
- Select the weeks of Camp you would like.
- Payment is required within 5 days of the approval notification.

Applicant Information:

Name of Child _____ Gender: ___ Birth Date: _____

Name of Parent /Guardian: _____ Birth Date: _____

Address: _____ Postal Code: _____

Telephone(Day): _____ (Evening): _____

Email: _____

Household Details:

- Single-Parent Family
- Dual-Parent Family
- Other _____

Number of children in the family: _____

Annual Household Income (please check one)

- Less than \$29,999
- \$30,000 - \$39,999
- \$40,000 - \$49,999
- \$50,000 - \$59,999
- Over \$60,000

Please Check the PREFERRED Camp Weeks:

Week & Date	Theme	Fee	Preferred Choice
Week 1 – June 23- 27	Summer Bonanza	\$200.00	
Week 2 – June 30 – July 4	Ooey Goey	\$160.00	
Week 3 – July 7 - 11	Splish Splash	\$200.00	
Week 4 – July 14 - 18	Nature Unleashed	\$200.00	
Week 5 – July 21 – 25	Muddy Buddies	\$200.00	
Week 6 – July 28- Aug 1	Detective Week	\$200.00	
Week 7 – August 4- 8	Shark Tank	\$160.00	
Week 8 – August 11- 15	Contests and Competitions	\$200.00	
Week 9 – August 18 - 22	Echoes of Camp	\$200.00	

Proof of Financial Need:

- Canada Child Benefit Notice for the previous year 2024
- Or
- Notice of Assessment for the previous year 2024



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From the Camper Daily Checklist are there items that you are unable to provide? Y/N
If Yes, what are these items?

Professional Referral (teacher, social worker, case manager, professional agency, etc)

Name: _____

Relationship to child: _____

Contact Information: Telephone #: _____ Email: _____

Comments: _____

Applications are reviewed weekly on Mondays in the order they are received.

I would like to apply for the YMCA Camp Financial Assistance because I am unable (not unwilling) to pay the full fee under any of the standard payment options. If my financial circumstances change, I will notify the YMCA to discuss my financial situation.

If I fail to make the agreed-upon payments, my child/ren's enrollment will be withdrawn.

Signature: _____

Date: _____

Deadline for submission is Friday, May 30th 2025

Completed applications are to be emailed to:

April Morton – april.morton@ymcamoncton.ca

-or dropped-off at:

The Greater Moncton YMCA

30 War Veterans Avenue

Moncton NB

E1C 0B3

Office Use Only:

Application Received: _____ Reviewed: _____

Subsidy: _____ Parent/Guardian Fee: _____

Registered for Camp Week (s)

: _____

Payment for Summer Camp is due by: _____