



[www.susquehannock.com](http://www.susquehannock.com)  
866-482-2677 • 570-967-2323

Dear Parent/Guardian

Thank you for considering Camp Susquehannock as the camp for your child. Each year, our scholarship program becomes more popular and our number of applications keeps increasing. In order to ensure your child is eligible for a scholarship to our camp, we need you to fill in the attached forms in their entirety and mail them back to us no later than March 1<sup>st</sup>, 2012.

There are a number of steps that need to occur in the application process. Please make sure you complete each step:

1. Send us your fully completed application form accompanied by a \$100 application fee. If there is no application fee, we cannot process your application. If your application is accepted, the fee will be credited towards tuition. If your application is not accepted, the fee will be **returned in full** to you. If, however, you withdraw your application after May 1<sup>st</sup>, 2012, your application fee will not be refunded.
2. As part of the scholarship application process, we will need some references for the child who is applying to attend camp. Please let your references know that we will be contacting them between March 1<sup>st</sup>, 2012 and May 1<sup>st</sup>, 2012.
3. Where possible, we will have a camp representative come and visit the child applying for the scholarship. This will take place in their home environment. We ask that the child's parent or guardian be present at this home visit. We will contact you to set up a time.
4. We will let you know on or before May 1<sup>st</sup>, 2012 whether you will be awarded a scholarship to attend Camp Susquehannock in 2012 or not. If you are granted the scholarship, and for any reason your child is unable to attend camp, please let us know immediately so we may use that scholarship to benefit another child.

If you have any questions, please do not hesitate to call us.

Regards  
The Camp Susquehannock Scholarship Committee

*Camp Susquehannock was founded in 1905 and is a not-for-profit summer camp.*



2308 Tripp Lake Road, Brackney, PA 18812



# Camp Susquehannock 2012 Scholarship Camper Application

Mail to: Camp Susquehannock 2308 Tripp Lake Road, Brackney, PA 18812

A registration fee of \$100.00 must accompany this application to begin the process.

Please make check payable to "Camp Susquehannock, Inc."

If applicant is accepted, the fee will be credited toward tuition. If the applicant is not accepted, the fee will be returned.

Application deadlines: Returning applicants – January 15<sup>th</sup>, 2012 (you will be told by February 15<sup>th</sup>, 2012 if you are accepted)

New Applicants – March 1<sup>st</sup>, 2012 (You will be told by May 1<sup>st</sup>, 2012 if you are accepted)

Please Print

\_\_\_\_\_  Male  Female

Full Name of Camper (Last, First)

Nickname

Date of Birth (MM/DD/YYYY)

School Attending

Grade completed by July 1, 2012

Race (Optional):  African American  Asian  Caucasian  Hispanic  Other \_\_\_\_\_

Does camper have previous camp experience?  Yes  No

Name of camp \_\_\_\_\_ # of years attended \_\_\_\_\_ Overnight or Day? \_\_\_\_\_

Name of Parents/Guardians

Home Address

City

State

Zip

Home Phone

Camper's Email

Parent/Guardian's Cell Phone(s)

Parent/Guardian's Email

Camper resides with (please check which ever is appropriate)

Both parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Check any which apply: Father Deceased \_\_\_\_\_ Mother Deceased \_\_\_\_\_ Parents Divorced \_\_\_\_\_

Parents Separated \_\_\_\_\_ One spouse unable to work \_\_\_\_\_

Mother/Female guardian's Occupation: \_\_\_\_\_ Current Salary: \$ \_\_\_\_\_

Father/Male guardian's Occupation: \_\_\_\_\_ Current Salary: \$ \_\_\_\_\_

*IF CHILD IS SUPPORTED BY TWO PARENTS/GUADIANS, INFORMATION FOR BOTH **MUST BE FILLED OUT***

Registration fee Enclosed: \$ \_\_\_\_\_ Additional amount of you can contribute towards camp tuition: \$ \_\_\_\_\_ ?

**If camper receives a partial scholarship, who will be responsible for Camper's bill:**

Name

Relationship to Camper

Address

City

State

Zip

Home Phone

Work Phone

Cell Phone

**If camper is being sponsored:**

Name of school or organization sponsoring you: \_\_\_\_\_

Phone #: \_\_\_\_\_ Contact Person: \_\_\_\_\_

**Dates:**

Please note the dates of camp sessions in 2012 and list your *first* and *second* choices. ***Applicant must remain flexible for either session.***

June 24 (Sunday) to July 17 (Tuesday) \_\_\_\_\_, or July 19 (Thursday) to August 11 (Saturday) \_\_\_\_\_, or both needed \_\_\_\_\_

***Your application is not complete without a copy of your most current Tax Return form and all pertinent schedules (i.e., itemized deductions, business gains/losses, etc.). Please also provide the figures below:***

Adjusted Gross Income: \$ \_\_\_\_\_

Taxable Income: \$ \_\_\_\_\_

Child Support: \$ \_\_\_\_\_ (Annual/Monthly) Monthly Government Assistance: \$ \_\_\_\_\_

Home: Own ( ) Present Market Value: \$ \_\_\_\_\_

Unpaid Mortgage: \$ \_\_\_\_\_

Rent ( ) Annual Rate: \$ \_\_\_\_\_

Please give the information below for **all dependent children:**

<u>Name</u>	<u>Age</u>	<u>Name of School</u>	<u>Public/Private/College</u>	<u>Tuition/Year</u>	<u>Assistance</u>

How much did you spend for education this school year? \$ \_\_\_\_\_

Are you sending other family members to camp? Yes No

Name of camp(s): \_\_\_\_\_

Cost: \$ \_\_\_\_\_

***THIS IS VERY IMPORTANT!*** The Scholarship Committee ***MUST*** understand your need for financial assistance. If you have extraordinary expenses, either on-going or one-time or someone is out of work or you are planning for a future expense, we need to know to best assist you in this summer's camp experience. Use another page, if necessary.

Describe any extraordinary expenses and your need for aid at this time:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child work/play well with others? \_\_\_\_\_ Own age? \_\_\_\_\_ Older? \_\_\_\_\_ Younger?

Describe your child's personality \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the main purpose in sending your child to Camp Susquehannock? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there any special sport or activity you wish to have emphasized? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any special interests, aptitudes or abilities? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please note any other special information that we should be aware of including special needs (i.e. medical issues, allergies, and/or social/physical conditions that require attention). Please check:

- Medical Condition     Life threatening allergy     Mild allergy     Medication     Other

Please comment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Camper wears what size t-shirt?  Youth Medium     Youth Large     Adult Small     Adult Medium     Adult Large  
 Adult X-Large

If Roman Catholic, do you wish your child to attend weekly Mass?     Yes     No

**An Emergency Contact (other than Parent/Guardian):** \_\_\_\_\_

		Name	Relationship to Camper	
Address		City	State	Zip
Home Phone	Work Phone		Cell Phone	

**Please provide us with 3 references for your child. This should be someone that knows your child well and has seen them in a social setting. At least one reference must be a teacher. Other good examples include a coach, a community leader etc.**

1. Name of reference \_\_\_\_\_ Knows child from: \_\_\_\_\_  
 Known child for how long: \_\_\_\_\_  
 Contact phone number \_\_\_\_\_

2. Name of reference \_\_\_\_\_ Knows child from: \_\_\_\_\_  
 Known child for how long: \_\_\_\_\_  
 Contact phone number \_\_\_\_\_

3. Name of reference \_\_\_\_\_ Knows child from: \_\_\_\_\_  
 Known child for how long: \_\_\_\_\_  
 Contact phone number \_\_\_\_\_

**Optional Programs you can enroll your child in and pay for in full by May 31<sup>st</sup>, 2012:**

We accept VISA, MasterCard, Discover, Money Orders and checks made payable to Camp Susquehannock Inc.

**Horseback Riding** (Offered at \$45.00 per lesson.)

Full Season (20 lessons)	<input type="checkbox"/> \$900.00	Full Season (32 lessons)	<input type="checkbox"/> \$1440.00
First Session (10 lessons)	<input type="checkbox"/> \$450.00	First Session (16 lessons)	<input type="checkbox"/> \$720.00
Second Session (10 lessons)	<input type="checkbox"/> \$450.00	Second Session (16 lessons)	<input type="checkbox"/> \$720.00
Intro Session (6 lessons)	<input type="checkbox"/> \$270.00	Intro Session (12 lessons)	<input type="checkbox"/> \$540.00

\*Does camper have parent permission to jump?  YES  NO \*(subject to approval of the instructor)  
 Does your child have previous riding experience?  YES  NO If yes, please describe \_\_\_\_\_

**Tutoring** (Offered at a rate of \$45.00 per lesson for each subject). Select a maximum of two from the following subjects: Math (Specify course and level), Language Arts (Specify: Grammar, Writing, Conversation, Reading) Spanish, or ESL – English Second Language (only offered 3x/week). Other subjects MIGHT be available upon request. (We strongly suggest that first time campers who do not speak English as their first language, should sign up for ESL)

First Named Subject: \_\_\_\_\_ Second Named Subject: \_\_\_\_\_

Number of lessons listed in ( ) next to price

Full Season	<input type="checkbox"/> \$900 (20)	<input type="checkbox"/> \$1440 (32)	Full Season	<input type="checkbox"/> \$900 (20)	<input type="checkbox"/> \$1440 (32)
First Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)	First Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)
Second Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)	Second Session	<input type="checkbox"/> \$450 (10)	<input type="checkbox"/> \$720 (16)
Intro Session	<input type="checkbox"/> \$270 (6)	<input type="checkbox"/> \$540 (12)	Intro Session	<input type="checkbox"/> \$270 (6)	<input type="checkbox"/> \$540 (12)

**Transportation:** Please check off as needed. ALL CAMPERS ARE EXPECTED TO ARRIVE ON DATES INDICATED BELOW.  
 IF OTHER DATES ARE NEEDED, PARENTS MUST MAKE ALL NECESSARY ARRANGEMENTS.

Venue	Arrival	Departure	Session	Cost	✓
To/From Plymouth Meeting Mall	Sun 6/24	Sat 8/11	Full	\$50.00 each way	
To/From Plymouth Meeting Mall	Sun 6/24	Tues 7/17	1	\$50.00 each way	
To/From Plymouth Meeting Mall	Thurs 7/19	Sat 8/11	2	\$50.00 each way	
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Sun 6/24	Sat 8/11	Full	\$40.00 each way	
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Sun 6/24	Tues 7/17	1	\$40.00 each way	
Domestic Flights must arrive/depart at the Greater Binghamton Airport (BGM)	Thurs 7/19	Sat 8/11	2	\$40.00 each way	
International Flights To/From Newark	Sat 6/23	Sat 8/11	Full	\$150.00 each way	
International Flights To/From Newark	Sat 6/23	Tues 7/17	1	\$150.00 each way	
International Flights To/From Newark	Wed 7/18	Sat 8/11	2	\$150.00 each way	

\*PLEASE NOTE FOR PLYMOUTH MEETING MALL PICK UP/DROP OFF - ALL BAGGAGE MUST BE SENT TO/FROM CAMP, PRIOR TO ARRIVAL.

**Campteen:** We also have a store at camp and campers have an account set up in their name. They can purchase items such as toiletries and camp clothing.

If paying with credit card, please fill in information below.

<input type="checkbox"/> VISA	<input type="checkbox"/> Discover	<input type="checkbox"/> Master Card
<b>Account Number:</b>		<b>Expires:</b>
<b>Amount:</b>	<b>Authorized Signature:</b>	
<b>Cardholder's Name:</b>		
<b>Billing Address for card:</b>		

**How did you hear about Camp Susquehannock?**

Camp Fair (Location) \_\_\_\_\_ Camp Directory (name): \_\_\_\_\_

Referral Agency (name): \_\_\_\_\_

Susquehannock Website  Yes  No

Other Website (address): www. \_\_\_\_\_

Other (please specify): \_\_\_\_\_

**Were you referred by another person?**

Camp Staff (name): \_\_\_\_\_

Camper/Family (name): \_\_\_\_\_

Alumnus (name): \_\_\_\_\_

**Authorization, Release and Waiver:**

*I hereby give permission for my child to participate in all regular camp activities and programs including out-of-camp trips. I authorize Camp Susquehannock, Inc. to use photographs and video media of my child as may be needed for its records or public relations programs.*

*The first \$200.00 is a non-refundable administrative processing fee. All other payments are refundable before May 1, 2012. Payment in full must be received prior to admittance. Medical information and releases are also required to be submitted prior to admission. If a camper arrives late, leaves early or is dismissed for any reason, there will be no refunds. There are additional charges for extra days and airport transportation, bedding, tutoring or riding.*

*I further assume all risk of, and hold harmless and do hereby release, discharge Camp Susquehannock, Inc., its directors, officers, agents and employees from and against all liability for loss, damage, injury, or illness to the camper or his/her property relating to or deriving from his/her presence at or travel to or from, the Camp Susquehannock Inc. from whatever cause except for gross negligence or willful misconduct.*

*I have read and understand the contents of this authorization, release and waiver including payment, refund and cancellation policy and intend to be legally bound hereby.*

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Reminder:**

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**For CSI Office Use Only:**

Date Application received: \_\_\_\_\_

Application fully completed: Yes No

Registration fee enclosed: Yes No

Date informed that application was received: \_\_\_\_\_

Date(s) references contacted: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Date informed of application status: \_\_\_\_\_