

# CJW JUNIORETTE CAMPERSHIP APPLICATION FORM



Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of Camp: \_\_\_\_\_

Type of Camp \_\_\_\_\_

## INCOME INFORMATION

Parent's Income: \_\_\_\_\_ Applicant's income: \_\_\_\_\_

Number and ages of other dependent children? \_\_\_\_\_

Will other dependent children attend camps that will require tuition? \_\_\_\_\_

Will any other financial aid be received towards applicants or dependents tuition? \_\_\_\_\_

List any other financial circumstances you would like to make us aware of:  
\_\_\_\_\_

I DECLARE THAT THE INFORMATION IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Juniorette Advisor: \_\_\_\_\_

Sponsoring Juniorette Club: \_\_\_\_\_