



Catholic Youth Summer Camp, Inc.
P.O. Box 6313
Columbus, OH 43206
Phone: 888-548-CYSC
www.cysc.com

CAMPERSHIP FINANCIAL ASSISTANCE

Thank you for your interest in Catholic Youth Summer Camp. Each year, many well-deserving Catholic families approach us requesting financial assistance so that their children may attend CYSC. Since CYSC is not a profitable venture, we must rely on the generosity of individual donors, pastors, and parishes to meet all financial aid requests. Know that we will assist you to the best of our ability as you work to identify possible funding sources to help meet your financial need.

Our required process:

- Complete Part A of the CYSC Campership Aid Form
- After completing Part A, submit the form to your parish pastor or parish administrator, requesting that they complete Part B.
- We will communicate our response back to as soon as we hear back from your parish



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CYSC CAMBERSHIP AID FORM

NOTE: All information provided in this form will be held in strictest confidence.

PART A to be completed by Parent/Guardian
PART B to be completed by Parish Pastor/Administrator

PART A – to be completed by Parent/Guardian:

Name of Camper: _____

School Camper Attends: _____

Name of Parent/Guardian completing this form: _____

Address: _____

Phone: Home: _____
Work: _____
Cell: _____

Email: _____

Name of parish where you are registered: _____

Registration fee for CYSC 2008: \$460

Please check one:

- I am unable to pay the full amount now, but would be able to make payments for the full amount between now and the time my child attends camp.
- I am able to pay \$ _____ now towards my child' registration and am seeking \$ _____ to cover the remaining balance.
- I am unable to pay anything towards my child's registration and am seeking the entire registration amount of \$460.

Please give a brief explanation of why you are seeking financial aid. Use back of page this page if necessary.

Signature of Parent/Guardian completing this form: _____

PART B – to be completed by Parish Pastor/Administrator

Dear Parish Pastor/Administrator:

The family indicated in Part A of this form is seeking financial assistance to register their child for Catholic Youth Summer Camp 2009. Each year, many well-deserving Catholic families approach us requesting financial assistance. Since CYSC is not a profitable venture, we must rely on the generosity of individual donors, pastors, and parishes to meet these requests. We ask that you please consider your ability to assist this family with the financial resources requested in Part A and to advise us of your intentions by completing Part B of this form and returning it to us at your earliest convenience. THANK YOU!

This family is registered and actively involved in parish life: YES NO (circle one)

Reasons you believe this family should or should not be considered for financial assistance:

My parish will provide financial assistance in the amount of \$_____ to assist this family.
These funds will be paid as follows: _____

Signature of Parish Pastor/Administrator: _____

Please complete and return to:
CYSC, Inc.
ATTN: Bob Moraine / Camperships
P.O. Box. 6313
Columbus, OH 43206