



2024 Hale Summer Programs Financial Aid Packet

This application is open to all families regardless of race, color, religion, sex, national origin, age, disability, and familial status. Our financial aid awards are available based on demonstrated financial need, space available in the program, and available funds. Hale's goal through financial aid is to provide a high-quality experience to as many children and families as possible each summer. We aim to provide at least one session of a summer program per child and will approve additional sessions if funding is available.

How it Works

1. Families must complete the entire Financial Aid Packet
2. A \$100 down payment is due to hold the space in camp. Check or credit card payment required. Space will not be reserved until payment is made, even if application is received by Hale.
3. Spaces will be reserved contingent upon the financial aid committee's approval at which point you can accept or decline the financial award.
4. All applications are due by February 1st at which time all submitted requests will be reviewed. Requests made after February 1st will be reviewed individually and are dependent upon the funds remaining.
5. If you are unable to accept the award, you must submit a written request to either reduce enrollment or withdraw. You must submit this request within two weeks of award notification to receive a refund of any deposit(s) connected to the withdrawal.

Documentation for Proof of Income

- W2/Tax Return of Primary Caregiver(s)
- OR

Two of the following:

- Last two pay stubs
- Unemployment check stubs (last two)
- Social Security or disability checks
- Retirement/pension income
- State Assistance (WIC, TANF, AFDC and/or DHCP)
- Self-Employed: Schedule C or other appropriate tax forms

Financial Aid Eligibility Guidelines

Families receiving financial aid are offered the award against our lowest discounted price. See the last page of the application for the price table for sessions. Hale offers aid in various ranges based on household income.

Annual Household Income	Qualified Award Range
\$101,000-130,000	20-35% Off
\$71,000-\$100,000	35-50% Off
\$41,000-\$70,000	50-65% Off
\$0-\$40,000	65-80% Off

App. # _____



2024 Financial Aid Application

The information you provide will be kept confidential; only people directly concerned with granting financial aid will see it. It is very important that you provide all the information requested. If information is missing or sent in after the deadline, it is possible that the application will be delayed or turned down as a result.

Part I: Income Information

Primary Caregiver Name: _____	DOB: _____
Home Address: _____	Phone: _____
Email Address: _____	Occupation: _____
Employer: _____	Business Address: _____
If the Caregiver is unemployed, please give the most recent position, employer, and dates of employment:	
Annual gross income of Caregiver:	\$ _____
Annual income of Caregiver from any other sources (after deductions. Including rent from tenants, interest, dividends, royalties, gifts, etc.):	\$ _____

Caregiver # 2 Name: _____	DOB: _____
Home Address: _____	Phone: _____
Email Address: _____	Occupation: _____
Employer: _____	Business Address: _____
If Caregiver # 2 is unemployed, please give the most recent position, employer, and dates of employment:	
Annual gross income of Caregiver # 2:	\$ _____
Annual income of Caregiver # 2 from any other sources (after deductions. Including rent from tenants, interest, dividends, royalties, gifts, etc.):	\$ _____

If Parents are legally separated or divorced, does one financially help/support the other?
(Check one) ___Yes ___No

If yes, which Caregiver pays financial support? _____

If yes, what is the net amount paid/received annually? \$ _____

Part II: Expense Information

Home of Primary Caregiver OR both Caregivers:

(Monthly mortgage payment or rent on home) \$ _____

Home of Caregiver # 2 if caregivers live apart:

(Monthly mortgage payment or rent on home) \$ _____

Dependents:

Total Number of Dependents _____

Monthly cost of educational/childcare expenses for all dependents: \$ _____

Part III: Child Information

Child(ren): Please list the children in your household (must complete for Camps and Family & Community Program).

Child #1 Name: _____ DOB: _____

School: _____ Grade: _____

Child #2 Name: _____ DOB: _____

School: _____ Grade: _____

Child #3 Name: _____ DOB: _____

School: _____ Grade: _____

Child #4 Name: _____ DOB: _____

School: _____ Grade: _____

Child #5 Name: _____ DOB: _____

School: _____ Grade: _____

Session Dates: Please select the sessions you wish to register for. Please correlate the camper registration above to the children listed below if applicable. If you are registering for the Family & Community Program, please select your session(s) under FCP.

Session	Dates	Child 1	Child 2	Child 3	Child 4	Child 5	FCP
Pre Camp	June 17-21						NA
Session 1	June 24-July 3 (Camp is closed 7/4 and 7/5)						
Session 2	July 8-July 19						
Session 3	July 22-August 2						
Session 4	August 5-August 16						

Program Selection: Please select the program area to which you are applying. If you are applying to multiple programs, please select all that apply.

Program	Unit	Cost	Child 1	Child 2	Child 3	Child 4	Child 5
Hale Adventure Camp	Adventure 101	\$1485					
	Basecamp	\$1575					
	Frontcountry	\$1615					
	Backcountry	\$1705					
	Wilderness Guide-In-Training	\$2794					
Hale MTB Camp	MTB 101	\$1507					
	MTB Intermediate	\$1575					
	MTB Advanced	\$1795					
	MTB CIT	\$2092					
Hale Day Camp	Kindercamp	\$1485					
	Lower Camp	\$1485					
	Middle Camp	\$1485					
	Teen Camp	\$1507					
	CIT	\$1895					
Pre Camp	Summer Sprouts	\$562					
	Outdoor Explorers	\$562					
	Summer Send'ers	\$652					
	Trailbreakers	\$652					
Family & Community Program Registration		Cost per Session	Indicate Which You're Interested In. <i>Please note there is a multi-session discount which will apply to the final balance.</i>				
Family & Community Program	Family Full Day	\$990					
	Family Nights & Weekends	\$540					
	Adult Individual Full Day	\$180					
	Adult Individual Nights & Weekends	\$90					
	Senior Full Day	\$90					

Part IV: Financial Request

Please note financial aid rewards range from 20-80% off the total amount depending on need, to accommodate as many families and campers as possible.

The total cost of my request is: \$ _____

I can afford to pay: \$ _____

Part V: Confirmation of Information

*All the above items need to be completed at the time of application to be considered. **All completed applications are due February 1, 2024. Applications received after the deadline will be considered on a case-by-case basis.** By signing below, I certify that all information is true and completed to the best of my ability:*

Signature: _____

Date: _____

Printed Name of Guardian: _____