

Financial Aid Summer 2024

Thank you for your interest in Beth Tfiloh Day Camps. The Camp Committee looks forward to your application.

Unlike other summer programs, Beth Tfiloh Camps does not receive support from any public funds or private foundations. Camp operates entirely on revenue derived from camp fees and relies solely on those fees to pay all camp expenses. For these reasons, Beth Tfiloh Camps is limited in the amount of financial assistance it can provide to camper families.

If you decide to apply for financial aid, use the checklist of items below to ensure all necessary material is received by March 1, 2024.

| The enclosed campership application, completed. |
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| A 2024 registration form for each camper for whom you are requesting aid. A \$250.00 deposit must accompany each registration. Per camp policy, all monies are refundable prior to March 1, 2024. |
| A copy of a 2023 1040 tax return as applicable from each member in the household. |
| A copy of a 2023 W2 as applicable from each member in the household. |
| A copy of a 2023 1099 as applicable from each member in the household. |
| |

If we are unable to give you the funds that you need, many area agencies and congregations have funds available for Jewish camp experiences and some rabbis will use their discretionary funds for this purpose.

As always, if you have questions, please feel free to contact us at 410-517-3451.

Shalom.

Sam Bloom Marty Taylor

Director BT Camps Chairperson



2024 Beth Tfiloh Camps Campership Application



Phone 410-517-3451 * Fax 410-517-3454

Read the enclosed cover letter. The deadline for submission is March 1, 2024; complete both sides of this application.

| Name of potential camper 1 | e of potential camper | | Grade in September 2022 | | Name of potential camper 2 | | | Grade in September 2021 |
|---|--|--|----------------------------|---|----------------------------|---|--|---|
| Name of potential camper 3 | ntial camper | | Grade in September 2022 | | Name of potential camper 4 | | | Grade in September 2021 |
| Camper's present home address | | | | | | ZIP code | | |
| Mother's name | Day or work phone | | | Mobile phone | | Other phone | | Occupation |
| Mother's address | | City | | State | | ZIP code | | Employer |
| Father's name | Day | or work phone | | Mobile phone | | Other phone | | Occupation |
| Father's address | City | | | State | | ZIP code | | Employer |
| List name, age, and relationship of all other household | d members | | | | | | | |
| Parents are presently | | | | | Campe | er(s) now live(s) with | | |
| ☐ married ☐ legally separated ☐ divorce | | | | | | | | pecify |
| If parents are divorced or legally separated, describe | in detail the | child support requiren | nents | | | | | |
| | | | | | | | | |
| If you have previously sent children to Beth Tfiloh C | amps, please | e tell whom and which | years | What is your tot | al month | nly car payment? W | hat is your i | monthly mortgage or rent? |
| What school(s) does/do the camper(s) attend? | | | | | | Does the camper belon | g to Beth T | filoh Congregation? |
| Do you plan to send the camper(s) to other summer p \Box yes \Box no | orograms? | If so, where and for | how l | ong? | | | | |
| To what extent is financial help available from grand | the extent is financial help available from grandparents or other relatives? Have there been any extraordinary or unexpected expenses this year? If yes, provide details the extent is financial help available from grandparents or other relatives? | | | | | | | s year? If yes, provide details |
| List other funding sources applied to for the current of | alendar yea | r | | | | | | |
| The maximum that I/we and other family mem | bers can co | ontribute toward my | y/our | camper(s) camp tu | ition is | 3 | \$ | |
| I/We understand that Beth Tfiloh Camps does funding from The Associated or any other cor Tfiloh Camps without financial aid. I understa whether or not a campership will be offered us the event that a grant is made, it is for one year | nmunity fo and that thi ntil after M | oundations. I am ap s is not a discount a larch 1st. Therefore | plying and is e, I/w | g for a campership aid designed to he e understand that I | becauselp those | se my camper will def e experiencing financi | initely not al hardshi for other s | be able to attend Beth p. I/we will not hear summer opportunities. In |
| Parent \ | Date 5 | \ | | Parent 🔪 | | | Date | <u> </u> |

| Provide a fully detailed reason for requesting financial assistance. | | | | | | | | | |
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