

2013 CAMP FEES SPONSORSHIP REQUEST FORM

The purpose of the sponsorship fund is to help families out that can't afford camp fees but don't qualify for other funding

- An enrolment form and sponsorship request is required for each camp and child must be enrolled prior request being made.
- <u>All sections are required to be filled in</u> unfortunately we cannot process incomplete sponsorship request forms and as a result your child could miss out on recieving sponsorship

	SOME BASIC DETAILS
\rightarrow	Camper's Name:
STEP 1	Your Full Name:
	Your Postal Address:
	Your Phone Number:
	Your Email Address:
	Your relationship to camper:
	Name of Camp Attending:
	Dates of Camp Attending:
	Have you completed a camp enrolment form for this camp?
	Yes $N_0 \rightarrow Please \ complete \ an \ enrolment \ form \ before \ continuing$
	Please tell us why you need sponsorship for camp fees:
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	OSCAR CHILDCARE SUBSIDY
	Have you ever applied to Work and Income for the OSCAR childcare subsidy?
	No → Does your family have at least one parent/caregiver can stay home and care for the children during the week of camp?
STEP 2	Yes -> It is likely you <u>do not qualify</u> for OSCAR subsidies - <u>however you can still call 0800 559 009 to check</u>
	\mathbb{N}_{o} \rightarrow Please answer the following questions
	Do you have one child and your weekly family income before tax is less than \$1400?
	Do you have two children and your weekly family income before tax is less than \$1600?
	Do you have three or more children and your weekly family income before tax is less than \$1800
	Do you have special circumstances where you need to care for a sick partner or need to attend regular medical treatments?
	If you answer yes to any one of the above questions, then you may qualify for OSCAR subsidies towards camp fees - please call 0800 559 009 to arrange an OSCAR form to be sent to you, complete it and let the CYC office know if you

Please note:

• OSCAR Child-care subsidies are applied based on family income and work/study hours and may not cover full camp fees.

are applying.
Yes → Have you ever qualified for the OSCAR subsidy?

• For more information about OSCAR subsidies and current income rates please visit: http://www.workingforfamilies.govt.nz/childcare-assistance/

 $\gamma_{\rm es}$ \rightarrow Please apply for OSCAR subsidies again by <u>calling 0800 559 009 to arrange an OSCAR form to</u>

You will then need to wait until after the camp is over and the OSCAR subsidy has been approved (or declined) with subsidy payments made before you applying for sponsorship if

1. Complete the form and return it to Work and Income before camp starts.

be sent to you and ask for the request to be put on record

2. Let the CYC office know if you are applying.

No ightharpoonup Please tell us why the OSCAR subsidy was declined...

1	OTHER FUNDING SOURCES
	Do any children in your family currently receive the Child Disability Allowance? No Yes -> All the children within the family will qualify for camp fees to be paid by Work and Income - please call 0800
	No Yes -> All the children within the family will qualify for camp fees to be paid by Work and Income - please call 0800 559 009 to arrange and let the CYC office know.
STEP 3	T (.1 . 1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1
	Is your family associated with or attend a church? No → Please continue on to step four
	Yes -> Please give us your church details so we can seek sponsorship from them if available
	Church Name:
	Church Address:
	Pastor's Name:
	Pastor's Phone:
	Pastor's Email:
	Is your family associated with or clients of any of the following organisations:
	Strengthening Families Presbyterian Support
	Anglican Family Care Salvation Army
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	FINANCIAL SITUATION
	What is your families weekly income after tax?
	How many people are in your family living at home?
STEP 4	Adults Teenagers (11 - 18 years old) Children (0 - 10 years old)
	Is anyone in your household on a benefit and if so, which one?
	How much can you afford to pay towards the camp fees so that the sponsorship fund can benefit more?
SALANS NO.	X X
	DECLARATION
	 I declare that the supplied information is correct and accurate to the best of my knowledge. I understand that the supplied information will be kept confidential to CYC office staff and used
	for the allocation of sponsorship funds only. I will be kept on file for auditing purposes even after the camp has past.
STEP 5	Caregiver's Name:
	Caregivers Signature:
	Date:
	Last Update: 11 December 2012
	christian
0.S.G.A.	charities commission commission
	Kominana Kaupapa Atawhai Charitee Number: CC25364 N E W Z E A L A N D
OFFICE USE ONL	Y:
Received Date:	