

# 2020 Scholarship Program



**YMCA CAMP ERNST**

7615 Camp Ernst Rd  
Burlington, KY 41005  
Phone: (859) 586-6181

## Requirements:

1. **A copy of the family's 2018 or 2019 income tax return must be attached to the scholarship application.** If your family does not file taxes a signed letter from a government services worker stating your benefits is acceptable.
2. **All scholarship Campers are required to participate in a community service activity** for a total of 5 hours. Some examples of service activities include: staying after school to help a teacher, visiting an elderly neighbor, volunteering at a local nursing home or church nursery etc.
3. **All scholarship recipients are also required to write a thank you letter.** "Dear Sponsor, Thank you for helping to send me to YMCA Camp Ernst...." If the child has attended camp in the past please ask him or her to write about their favorite activities, friends they met, things they enjoyed about camp etc.

**Note: Scholarships are on a first come first served basis.**

## Instructions:

1. Scholarships are granted as funding is available. Please submit your application at your earliest convenience.
  - Completed scholarship application
  - A copy of your **2018 or 2019** income tax return. If you do not file taxes a signed letter from a government services worker stating your benefits is acceptable.

**\*W2s and Pay Stubs will NOT be accepted.**  
**\*\*Please DO NOT send money, coupons, or registration forms at this time.**
2. **Wait** for your acceptance letter from Camp Ernst. This will be mailed.
3. **Use the following check list and return as directed in acceptance letter.**
  - Specially marked registration form you receive with your acceptance letter
  - Amount you are asked to pay in the acceptance letter. Deposit is required. Payment plans are offered; please call the office at 859-586-6181 for additional information.
  - Completed community service form
  - Thank-you letter
4. Once this information is received in the Camp Ernst office we will send you a confirmation of your child's registration by email with additional camp info and packing tips.  
Health Form to be completed online after confirmation of registration.
5. Check your camper in on Sunday at 3 PM of your designated week and pick them up the following Saturday at 9 AM.

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**Funds are limited. First come first served.  
For scholarship consideration, please submit as soon as possible.**

Child's Name \_\_\_\_\_ Age \_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_

**Complete Mailing Address** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Child's School 2020-2021 \_\_\_\_\_ Grade for Fall of 2021 \_\_\_\_\_

County \_\_\_\_\_

Parent Name/Guardian \_\_\_\_\_ Phone #1 (\_\_\_\_) \_\_\_\_\_

Phone #2 (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

2nd Contact Name & Relationship \_\_\_\_\_

Phone #1 (\_\_\_\_) \_\_\_\_\_

**Total Number in Household** \_\_\_\_\_

**Total Household Gross Income per Year \$** \_\_\_\_\_

(Total household income including child-support, unemployment, public assistance, and other)

Should you have questions as to what you should send, please contact the camp office (859) 586-6181

- This is my child's first year attending Camp Ernst.
- I am interested in an Horse Camp Scholarship (must be 10 or older)
- Check if you'll need help getting any of these items before you child's week of camp.
  - Sleeping Bag  Bathing Suit / Towel  Other \_\_\_\_\_

Please explain why you want your child to be a part of this camp program? \_\_\_\_\_

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# Scholarship Program Community Exchange Form



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## Complete five hours of community service to be awarded scholarship.

To be completed by agency representative or adult (other than parent) who witnessed the community service.  
FIVE hours of community service are to be completed by the camper in the 2020-2021 school year.

\_\_\_\_\_  
Name of person who did community service

In serving:

\_\_\_\_\_  
Name of agency that was served

Verified by:

\_\_\_\_\_  
Signature of agency representative

\_\_\_\_\_  
Print name and title

## Must be completed by participant to be eligible for discount:

What job did you do? \_\_\_\_\_  
\_\_\_\_\_

What did you get out of it? \_\_\_\_\_  
\_\_\_\_\_

What did your community get out of it? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Funds are limited; First come first served. Funding is limited.  
Must return this page within 30 days of acceptance letter.**

**Scholarship Program  
Thank You Letter**



**YMCA CAMP ERNST**

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**Dear Sponsor,**

**Thank you for helping to send me to YMCA Camp Ernst...**

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