

YWCA Knoxville
2009 Summer Camp Program
Financial Assistance Form

124 S. Cruze St.
 Knoxville, TN 37915
(865)-546-0651 Fax. (865)-522-8095

Financial assistance is only available to children who will be enrolled for the majority of the summer session.

Father's Name: _____
 Employer: _____
 Work Phone: _____
 Mother's Name: _____
 Employer: _____
 Work Phone: _____

Family income(monthly)	Employment	Child Support	Families First	Other
Father				
Mother				

Names of children & adults living in the home:

Name:	Income:

Is/Are your children eligible for free or reduced lunches at school? Yes No

Number to be enrolled in the Summer Camp Program for 2009 _____

Please submit proof of all household members' income along with copies of most recent check stubs and phone numbers so that we may verify the information.

By signing this form, I give the YWCA of Knoxville, TN permission to contact the above named employer(s).

Signature: _____ Date: _____