

2016 Summer Camp Payment Plan/Financial Assistance

Thank you for considering Trout Lake Camps for your child's summer camp experience. We offer payment plans to any families that would prefer to spread their payments out to make camp a reality for their children. We also offer a limited amount of financial assistance to families that are in need (see guidelines on back).

Payment plans and financial assistance cannot be completed or processed online. Please fill out both sides of this form and send it back to Trout Lake Camps, along with your child's summer camp registration form and a \$50 non-refundable deposit. Our registrar will process these on a first-come, first-served basis as quickly as possible. You will receive a confirmation e-mail indicating if your payment plan and/or financial assistance have been approved, along with the registration confirmation for your child's camp. We will not process any funds until a camper has been registered. If the camp is full, the registrar will contact you and your deposit will be returned.

Parent/Guardian Information	
Name(s)	
Address	
City/State/Zip	
Home Phone	
Cell Phone	
E-mail Address (We use e-mail to send out confirmations)	
Camper(s) Information	
1 st Camper Name	
Camp Week (1 st Choice) (See registration form for dates and pricing)	Camp Fee (Do not include any extra option fees)
2 nd Camper Name	
Camp Week (1 st Choice)	Camp Fee
(See registration form for dates and pricing)	(Do not include any extra option fees)
3 rd Camper Name	
Camp Week (1 st Choice)	Camp Fee
(See registration form for dates and pricing)	(Do not include any extra option fees)
4 th Camper Name	
Camp Week (1 st Choice)	Camp Fee
(See registration form for dates and pricing)	(Do not include any extra option fees)

(Continue on back)

Camp Fee Total _____

Please check one or both options below.

Payment Plan

I have enclosed the registration form(s) and the minimum \$50.00 deposit per camper. I have completed my payment schedule below, listing how much I will pay each month. I understand that each payment is due by the 15th of every month and must be paid in full by September 15, 2016.

Payment Schedule

Step 1. Only if applying for financial assistance, reduce your total camp fee by the award percentage that your household qualifies for. The registrar will contact you if there are any problems. Remaining Camp Fees \$

Step 2. Subtract the \$50.00 deposit(s) that is/are attached from your camp fee. Remaining Camp Fees \$

Step 3. Divide the remaining balance into monthly payments in the table below. This allows us to set up automatic payments.

Step 4. Do not add in fees for DVDs, horsemanship, care packages, or spending money. With a payment plan you can sign up for these additional items when you arrive at camp.

Month	Payment
January	
February	
March	
April	
May	
June	
July	
August	
September	

I will be sending in a check/money order/cash for these payments.

I am authorizing Trout Lake Camps to charge my credit card (listed to the right) on the 15th of each month for the amount that is listed in the payment schedule above. I understand that I will not be charged for additional options and will need to purchase these when arriving at camp. I can cancel these automatic payments by calling the Trout Lake Camps office (218.543.4565) at least <u>one</u> week prior to my next scheduled payment.

Financial Assistance

I have enclosed the registration form(s) and the minimum \$50.00 deposit per camper. I understand that the percentage of scholarship given is determined by my total family size and annual gross income. I also understand that I cannot add in additional options (photos, DVDs, horsemanship, care packages, and spending money) until arrival at camp.

My Total Family Size

My Family's Annual Gross Income

(Gross income is amount earned before taxes and deductions.)

My Family can pay \$ towards the total camp fee.

Total Family Size/ Annual Income Under	Maximum Award (Per Person)
2/\$35,000	50%
2/\$50,000	30%
3/\$40,000	50%
3/\$55,000	30%
4/\$45,000	50%
4/\$60,000	30%
5/\$50,000	50%
5/\$65,000	25%
6 or more/\$55,000	50%
6 or more/\$70,000	25%

My Family Qualifies for % (upon TLC office approval)

Please explain the circumstances that require financial assistance:

MasterCard Visa Discover

Account # _____

Expiration Date /

Billing Address: _____

Name on Card

Signature

Signature of Parent or Guardian (required) _____ Date ____

By signing this, I am stating that I have a true financial hardship that would prevent my child(ren) from attending camp without a payment plan and/or financial assistance.