



info@camptulakadik.com
www.camptulakadik.com
P.O. Box 367 Norton, NB E5T 1J7
506.839.2964

FINANCIAL ASSISTANCE FORM

FINANCES AREN'T A PROBLEM

At Camp Tulakadik we do our best to keep our summer camp prices as low as possible. Nevertheless, the cost of a week at camp can still be too great for some families. With this in mind, generous people continue to contribute to our Financial Assistance Program. If you do not have the financial means to pay for a week of camp but are interested in attending one of our many camps/events, please do not hesitate to consider our Financial Assistance Program.

HOW TO APPLY

- Register online for one of the great selection of camps and pay the deposit.
- Download and complete the application form.
- Requests must arrive at the camp in time to be processed (at least one month before the camp).

Once you have finished the completed form, email it to info@camptulakadik.com.

Camp Tulakadik will send you a confirmation email, confirming approval or disapproval for financial assistance.

HOW TO DONATE

If you are interested in making a tax-deductible donation to Camp Tulakadik's Financial Assistance Program, please do not hesitate to call or email the camp office at 506.839.2964 or info@camptulakadik.com.

Applicant's Name	_____	Camper's Name	_____		
Street Address	_____				
Town/City	_____	Province	—	Postal Code	_____
Home Phone	(_____) _____ - _____	Work Phone	(_____) _____ - _____		
Email Address	_____				

Camp Event Name	_____	Dates	_____
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Please explain why you are in need of assistance

Total Cost for Camp (including HST)	\$ _____	Amount of financial assistance needed	\$ _____
Have you received financial assistance for camp previously?		YES _____	NO _____
If YES, what year?	_____	What Percentage?	_____ %

*** If this form is completed by a friend, please provide the following information***

Your Name	_____	Phone	(_____) _____ - _____		
Street Address	_____				
Town/ City	_____	Province	—	Postal code	_____
Email Address	_____				

FOR OFFICE USE ONLY					
Attending	_____	Camp Cost	\$ _____	Assistance	\$ _____
Confirmed by	_____			CIC #	_____