

Black Rock Retreat 2027 Sponsorship Form

Part 1. Children in Camp (Use a separate application for each child if there are any foster children.)

Names of all children in Camp (First, Last)	Camp Session	SNAP or TANF case # (if any)

Part 2. If the child you are applying for is homeless, migrant or a runaway check the appropriate box.

Homeless ☐ Migrant ☐ Runaway ☐

Part 3. Foster Child

If this application is for a child who is the legal responsibility of a welfare agency or court, check this box ☐ and then list the amount of the child's personal use monthly income: \$ _____. Skip to Part 5.

Part 4. Total Household Income BEFORE TAXES.

LIST ALL HOUSEHOLD MEMBERS		MONTHLY INCOME				
Name (Last, First)	Check if NO income	Monthly Earnings From Work (Before Deductions)		Monthly Welfare Payments, Child Support, Alimony	Monthly Payments from Pensions, Retirement, Social Security	All Other Income Received Last Month
		Job 1	Job 2			
1	☐					
2	☐					
3	☐					
4	☐					
5	☐					
6	☐					
7	☐					
8	☐					

Part 5. Signature (Adult must sign)

An adult household member must sign the application. I certify that all information on this application is true and correct and that all income is reported. I understand that this information may be reviewed by sponsor officials who will verify the information on the application; and that deliberate misrepresentation of the information may subject me to denial of sponsorship.

Sign here: X _____ Print Name: _____ Date: _____

Part 6. Children's racial and ethnic identities (optional)

Mark one or more racial identities:

- ☐ Asian ☐ American Indian or Alaska Native
☐ White ☐ Native Hawaiian or Other Pacific Islander
☐ Black or African American

Mark one ethnic identity:

- ☐ Hispanic or Latino
☐ Not Hispanic or Latino

DO NOT COMPLETE--TO BE COMPLETED BY CAMP OFFICIAL

Total Income: _____ Household Size: _____
 Eligibility: SFSP Eligible _____ Over Income _____ Incomplete _____

I understand that if I purposely and/or knowingly provide false information I may be prosecuted.

Signature of Camp Official Determining Eligibility: _____ Date: _____

Required along with forms: Proof of income is needed to be considered for Sponsorship.

Acceptable forms of proof: W2, two consecutive pay stubs, or last year's tax return (choose one of three)

Parents of all agency-sponsored children and those requesting sponsorships are required to fill out this form in its entirety in order to determine their eligibility for sponsorship at Black Rock Retreat.

If you need help with this form, please email help@brr.org or call 717.529.3370.

Please enter the following below for contact purposes in case of questions by determining official:

Address: _____

Email Address: _____

Phone Number: _____

If you need an additional copy of this form, feel free to make copies, email, or call the number above to request more forms.

***If you have a SNAP or TANF Case Number: There should be a two digit county code that comes before the number, followed by a seven digit TANF or SNAP number (this is your record number). This is NOT your access number. Please count. If you only have six numbers you may have forgotten a "0".
(Correct Example: 12-3456789)

**In Part 4: please do not forget to add all of your children, even if they are not a camper or do not receive any income. Everyone living with you (including you) needs to be on this form. All income before taxes from last month should be the amount to be used.

*Only skip Part 4 if you have a foster child. Please remember to fill out Part 5 in its entirety regardless.