



# Traveling Players Ensemble Financial Aid Application

**1. Camper Name:** \_\_\_\_\_

Camp/Class/Workshop applying for at this time: \_\_\_\_\_

If more than one session, are you available for both: (circle one) Yes No NA

**2. Applicant Information:**

Full name of applicant \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_ House \_\_\_ Own \_\_\_ Rent \_\_\_

Home telephone number \_\_\_\_\_ Email address \_\_\_\_\_

Marital Status \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Combined Household Income \_\_\_\_\_

What other support do you receive? Please provide details on alimony, child support, or other income in your household?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the camper receive free or reduced price lunch through the public schools: \_\_\_ Yes \_\_\_ No

**3. Household:** (list all members of the household, include extended family/friends)

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

**4. Describe any circumstances that affect your ability to pay for your child's camp or class at Traveling Players . Use additional pages if necessary.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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