



Dear Friends:

Thank you for inquiring about financial aid at Hale. We strive to offer affordable, high-quality programs and are committed to making them accessible to children and families regardless of their financial circumstances. To that end, our donors support a Campership Fund that helps families in need cover the cost of program tuition. Anyone may apply for these funds.

### **The Application Process**

All applications must be received by 5 PM on February 28, 2019. Late applications will not be accepted.

Upon receipt of your application, the directors of Hale Summer Club Director and/or Hale Day Camp will forward it to the Financial Aid Committee for review. The group is comprised of Hale staff and board members who allocate aid based on need. All applications are held in the strictest of confidence.

While the committee attempts to support as many people as possible, please know that funds are limited and that not every request for assistance may be granted. All applicants may pay any balance due with a payment plan (regardless of whether aid is awarded).

You will be contacted by email regarding the status of your application by April 1, 2019, and your response is required by April 12, 2019.

### **Requirements**

- Applications will not be considered unless all bills from previous years are paid.
- A registration form for Hale Day Camp or Hale Summer Club must be submitted with the application for financial aid.
- A \$100 program deposit is required; it will be refunded in full should you choose not to enroll.

Please email or call if you have any questions. Hale's main office is open weekdays, 9 AM–5 PM.

Sincerely,

A handwritten signature in cursive script that reads "Shannon".

Shannon Obey  
Director, Hale Summer Club  
[sobey@halereservation.org](mailto:sobey@halereservation.org)

A handwritten signature in cursive script that reads "Calder".

Calder Akin  
Director, Hale Day Camp  
[cakin@halereservation.org](mailto:cakin@halereservation.org)



**2019 Financial Aid Application**  
Hale, 80 Carby Street, Westwood, MA 02090

In addition to completing the application, **please submit a copy of your 2017 or 2018 tax return to confirm income.** The information you supply will be confidential; only people directly concerned with granting financial aid will see it.

It is very important that you supply all the information requested. If information is missing, it is possible that the application will be delayed or turned down as a result.

**Please select the program area(s) to which you are applying.** Please note that you will need to fill out the registration card/packet for this program in addition to the financial aid application.

- Hale Day Camp       Hale Summer Club

**PART 1: PARENT/GUARDIAN INFORMATION**

**Adult 1 Name:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_

If Adult 1 is unemployed, please give the most recent position, employer, city, and dates of employment:

\_\_\_\_\_

Annual gross income after deductions for taxes and social security: \_\_\_\_\_

Annual income from all other sources after deductions (interest, dividends, royalties, gifts, tenant rent, etc.):  
\_\_\_\_\_

**Adult 2 Name:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address (if different than Adult 1): \_\_\_\_\_

Occupation/Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_

If Adult 2 is unemployed, please give the most recent position, employer, city, and dates of employment:

\_\_\_\_\_

Annual gross income after deductions for taxes and social security: \_\_\_\_\_

Annual income from all other sources after deductions (interest, dividends, royalties, gifts, tenant rent, etc.):  
\_\_\_\_\_

If Adults are separated, does one financially help/support the other? (check one) \_\_\_yes \_\_\_no

If yes, please explain who pays and how much is paid per year: \_\_\_\_\_  
\_\_\_\_\_

## PART 2: EXPENSES

**Home of Adult 1 or both Adults** is: \_\_\_house \_\_\_apartment Home is: \_\_\_owned \_\_\_rented

Monthly payment or rent on home: \$\_\_\_\_\_ Market value of home if owned: \$\_\_\_\_\_

*If parents live apart, Home of Adult 2* is: \_\_\_house \_\_\_apartment Home is: \_\_\_owned \_\_\_rented

Monthly payment or rent on home: \$\_\_\_\_\_ Market value of home if owned: \$\_\_\_\_\_

### Dependents:

1.

Name	Age	School	Amount of school tuition or childcare expenses you pay/month
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2.

Name	Age	School	Amount of school tuition or childcare expenses you pay/month
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3.

Name	Age	School	Amount of school tuition or childcare expenses you pay/month
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4.

Name	Age	School	Amount of school tuition or childcare expenses you pay/month
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## PART 3: ADDITIONAL INFORMATION

Please attach a cover letter outlining a complete overview of your family's finances *and* why it is that you will benefit from a summer at Hale.

## PART 4: REQUEST

The program I'd like to register for costs: \$\_\_\_\_\_ PROGRAM COST

I'm able to pay: - \$\_\_\_\_\_ ABLE TO PAY

Therefore, my financial aid request is: = \$\_\_\_\_\_ AMOUNT REQUESTED

## CHECKLIST

\_\_\_ **Financial Aid Application**

\_\_\_ **2017 or 2018 tax return**

\_\_\_ **2019 registration form for applicable program (HSC or HDC)**

\_\_\_ **\$100 program deposit (checks should be made payable to Hale Reservation)**

*I certify that the information given in this application is true, complete, and accurate.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name of Adult:** \_\_\_\_\_