



Summer Service Action Camp Registration Form 2010

General Information

Student's Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

School: _____ Age: _____

Grade Entering Fall 2010 (check one of the following): 7th 8th 9th

Parent/Guardian Name: _____

Phone Number: (Home) _____ (Work) _____

Email: _____

Summer Camp Sessions

Please check one of the following:

Session 1 only (Monday July 6th – Friday July 16th)

Session 2 only (Monday July 26th – Friday August 6th)

Both Session 1 and Session 2

If only one session is available I would prefer:

Session 1

Session 2

Extended Care

Please check one of the following:

I would like SSC to provide care for my child starting at 7:30am for an **additional \$50 per session**:

YES NO

I would like SSC to provide care for my child up to 5:30pm for an **additional \$50 per session**:

YES NO

TURN OVER



Students Sharing Coalition, Inc. is charging a **non-refundable fee of \$20 deposit at the time of registration** for participation in the 2010 Summer Service Camp. Fee will be applied to the cost of camp. A sliding fee scale has been established to make costs affordable for all families.

The registration fees are as follows:

Max. Gross Family Income	\$0-23,000	\$23,001-34,000	\$34,001-44,000	\$44,001-55,000	\$55,001-70,000	\$70,001-100,000	>\$100,000	
Household Size								
2	\$40	\$90	\$150	\$195	\$250	\$330	\$330	Summer Service Camp fees (per session, per child)
3	\$35	\$85	\$145	\$195	\$250	\$265	\$330	
4	\$30	\$40	\$90	\$150	\$195	\$250	\$330	
5	\$25	\$35	\$75	\$150	\$195	\$235	\$300	
6 +	\$20	\$30	\$40	\$90	\$150	\$220	\$275	

Income Category: \$ _____ **Requested Fee:** \$ _____

In order to verify your placement on the pay scale, please include a copy of your most current income tax form or a copy of a recent pay stub if your income has changed.

Some scholarships are available for families who are unable to afford the registration fee. We do not want to prevent any child from participating. Please visit our website www.studentssharing.org or contact Denise Mack at 410-662-8999 to discuss scholarship options.

Return the completed registration packet no later than JUNE 7th to:

Students Sharing Coalition, Inc. Fax: 410-662-9959
Attn: Denise Mack Phone: 410-662-8999
2315 N. Charles Street
Baltimore, MD 21218

A completed registration packet contains:

- **Completed Registration Form (front and back)**
- **Completed Student Form with attached Portrait**
- **Check or Cash \$20 deposit**
- **A copy of your most recent income tax form or pay stub**

Dear Applicant (Student),

The following questions will help us to learn more about you and get an idea of your interest areas, your past experience with service, and your creativity.

1. Please check the social issue below that is most interesting to you, or that you feel most strongly about. If you are interested in more than one, please rank them starting with 1 as the most interesting. It's okay if you do not know much about the issue - we would like to know what YOU feel strongly about.

_____ Homelessness/Poverty

_____ Education/Schools

_____ Violence/Crime Prevention

_____ Hunger

_____ Substance Abuse/Addiction

_____ Environment

_____ Healthcare/Elderly

_____ Other (Please describe the issue area) _____

2. Briefly, describe an experience you have had helping others or participating in a service project. This can be any experience you had where you feel you had an impact or made a difference for the person (or people) that you helped.

3. Please attach a self-portrait to this registration form, drawn by you. You can use paint, pencil, crayon, magazine clippings or whatever you'd like.