

## 2024 FINANCIAL AID "CAMPERSHIP" APPLICATION



Alameda & Contra Costa County Residents Federal Tax ID # 94-6000591

Complete the fields below. You can type or handwrite directly on the form. Incomplete or illegible forms will be returned.

Parent/Legal Guardian Information	
Full Name:	Date of Birth:
Relationship to Child(ren):	
Address: Include: Complete Street Address, City, and Zip Code	
Include: Complete Street Address, City, and Zip Code	
Email:	
Primary Phone #:	
Did you apply for financial aid "campership" in 2023?	
Child(ren) Information	
Full Name:	Date of Birth:
Certification: I (We) hereby certify that the enclosed informat knowledge. I (We) acknowledge and understand that the infor of determining my (our) eligibility to receive a financial aid from material misstatement, fraudulently or negligently made in the result in the denial of my (our) eligibility to receive a financial own transportation to and from activity sites.	rmation provided here will be relied upon for purpos om the Regional Parks Foundation and that any his or in any other statement made by me (us) may
By checking this box, I am confirming that the required with this application packet.	documentation (listed on the instructions) is include
Parent/Legal Guardian Signature:	Date:
	Da

The Regional Parks Foundation does not discriminate based on race, color, nationality, gender, ethnic origin, or religious belief in admission, student aid, Camperships, and other educational policies. All application information is confidential. Keep a copy for your records.

Submit completed application **WITH** supporting document(s) to: EBRPD – Reservations Department, 2950 Peralta Oaks Court, Oakland, CA 94605 Email: <a href="mailto:reservations@ebparks.org">reservations@ebparks.org</a> Fax: 510-635-5502. You will be notified via email of the status of your application 7-10 days after submission.