



## **2021 JEWISH SUMMER CAMBERSHIP APPLICATION**

The Jewish Federation of Central New York believes in the value of a Jewish overnight summer camp experience, which serves the mission of Federation by helping to strengthen Jewish identity and build a strong and thriving Jewish community for our future.

The Jewish Federation of CNY partners with the One Happy Camper Program to provide an incentive towards a first-time overnight camping experience. The One Happy Camper Program was created with the goal of inspiring new people to try Jewish camping. The philanthropists behind the program understand that Jewish communal institutions may not have yet succeeded in reaching Jews on the margins or even living outside of Jewish life. Thus, One Happy Camper incentives generally apply to families whose children do not attend a day school or yeshiva.

Federation also offers locally-funded scholarships where there is financial need.

### **GUIDELINES FOR ELIGIBILITY FOR SUMMER CAMBERSHIPS**

Funds administered by the Jewish Federation of CNY are for Jewish children who reside in the Syracuse and CNY area. Only immediate families of Jewish campers in the Greater Syracuse and CNY area are eligible.

Before a child can qualify for a camp grant, s/he must **FIRST** be enrolled at a camp that is on the official Foundation for Jewish Camp list at <https://www.jewishcamp.org/one-happy-camper/find-a-camp/>. Jewish overnight summer camps include those sponsored by Conservative, Reform, Orthodox and Reconstructionist streams of Judaism as well as those sponsored by Jewish organizations such as the JCCA, BBYO, NFTY, USY, Young Judea/Hadassah, and more. The approved camp must be listed on the current Foundation for Jewish Camp list.

## **FIRST TIME CAMPING INCENTIVE - ONE HAPPY CAMPER**

A **First-Time** Camper Incentive for a 19-consecutive day camp session is \$1,000.

A **First-Time** Camper Incentive for a 12-consecutive-day camp session is \$700.

The One Happy Camper Incentives are for children who are not currently attending a day school or yeshiva.

## **FEDERATION INCENTIVE**

The Jewish Federation of Central New York offers local Day School campers First Time Camping Incentives of \$500 for the 19-day sessions or \$350 for the 12-day session. Incentive grants are not based on financial need.

## **NEEDS-BASED SCHOLARSHIP FUNDING**

There are limited local scholarship funds available from the Jewish Federation of Central New York where there is a financial need.

Applications for all programs should be submitted to [bdavis@jewishfederationcny.org](mailto:bdavis@jewishfederationcny.org) or mailed to Barbara Davis, Jewish Federation of CNY, 5655 Thompson Road, DeWitt, New York 13214.

**APPLICATION FOR INCENTIVE/SCHOLARSHIP FOR  
JEWISH SUMMER OVERNIGHT CAMP**

1<sup>st</sup> Time Incentive Application [ ]      Scholarship Application [ ]

*Check one or both of these boxes. Financial information is ONLY required for need-based scholarships.*

**Name of Camper**

\_\_\_\_\_

**Home Address**

\_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Congregation (if any)** \_\_\_\_\_

**Grade & School** \_\_\_\_\_ **District** \_\_\_\_\_

**Parent #1 Name** \_\_\_\_\_

**Parent #2 Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Email** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Other Dependents of Parent(s)/Guardian(s)**

\_\_\_\_\_

\_\_\_\_\_

**Name, Age & Relationship**

\_\_\_\_\_

\_\_\_\_\_

**Name, Age & Relationship**

**Name, Age & Relationship**

**Name of Camp** \_\_\_\_\_

**Address** \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Camp Contact Name, Phone & Email:

\_\_\_\_\_

Camp Session Dates: \_\_\_\_\_ Total Camp Costs: \_\_\_\_\_

***One Happy Camper Scholarship applicants must FIRST apply to OHC.  
A copy of the letter/email of acceptance from the camp is required with this application.  
Incentives are paid directly to the camp.***

The signature of the parents/guardians is required attesting that all information provided is true and complete to the best of their knowledge.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR LOCAL NEED-BASED SCHOLARSHIPS:**

Camper's Name \_\_\_\_\_

Camp \_\_\_\_\_ Session dates \_\_\_\_\_

**Camp-Related Expenses**

Total Cost of Camp Session(s) \$ \_\_\_\_\_

Other Camp-Related Expenses \$ \_\_\_\_\_

**Total Camp-Related Expenses** \$ \_\_\_\_\_

**Funding for Camp-Related Expenses**

Camper's Own Contributions (Earned Income/Savings) \$ \_\_\_\_\_

Immediate Family Contributions (Parents/Siblings) \$ \_\_\_\_\_

Extended Family Contributions (Grandparents, etc.) \$ \_\_\_\_\_

Temple/Synagogue Contributions \$ \_\_\_\_\_

Camp Scholarship Contributions \$ \_\_\_\_\_

Other Funding Resources (Please identify source & amount) \$ \_\_\_\_\_

**Total anticipated Camp-Related Contributions** \$ \_\_\_\_\_

**Funding requested:** \_\_\_\_\_

Please identify any circumstances or issues which you consider relevant to this request.

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