



## 2025 Summer Camp Bursary Request

### Referrer Information:

1. Referrer's Full Name: \_\_\_\_\_
2. Referrer's Organization or Faith Group:  
\_\_\_\_\_
3. Phone Number: \_\_\_\_\_
4. Email Address: \_\_\_\_\_

\*Referrer is the person or organization confirming financial need.

### Camper Information:

1. Camper's Full Name: \_\_\_\_\_
2. Camper's Age: \_\_\_\_\_
3. Gender: \_\_\_\_\_
4. Parent/Guardian's Full Name: \_\_\_\_\_
5. Parent/Guardian's Phone Number: \_\_\_\_\_
6. Parent/Guardian's Email Address: \_\_\_\_\_
7. Child or Family Home Address:  
\_\_\_\_\_



Amount Referring Organization Can Contribute: \_\_\_\_\_

Amount Family can contribute: \_\_\_\_\_

Bursary Amount Requested: \_\_\_\_\_

**Please submit the completed form to the following contact:**

Film Camp for Kids & Youth

664 Victoria Ave. Windsor, ON N9A 4N2

[info@filmcampforkids.com](mailto:info@filmcampforkids.com)