Camper Subsidy Program – 2027

Parent/Guardian Information

First Name: _____ Last Name: _____

Relationship to Camper: _____

Address: _____ APT/Unit #:_____

City: _____ Prov.: _____ Postal Code: _____ _____

Home Phone: _____ Cell: _____

Email*: _____

*All correspondence, including tax receipts, is via email. I understand that if I can not provide an email address, information will be mailed to me at the address I have provided via Canada Post.

Number of Family Members (copy of Manitoba Health Card required): Adults: _____ Children: _____

Camper(s) Information

Name (first/last): _____ **Date of Birth** (yyyy/mm/dd): _____

Activity #/Program Start Date: _____

Name (first/last): _____ **Date of Birth** (yyyy/mm/dd): _____

Activity #/Program Start Date: _____

Name (first/last): _____ **Date of Birth** (yyyy/mm/dd): _____

Activity #/Program Start Date: _____

Financial Information - Applicants are required to provide the following accepted documents:

- Your Social Assistance Budget letter and OR a copy of your most recent Canada Revenue Agency Notice of Assessment identifying annual net income of all economic family members (available on the Canada Revenue Agency website or by calling 1-800-959-8281).
- Canada Child Benefit amount information (for children under 18 years old)
- CPP Disability Letter
- EIA Budget Letter
- Manitoba Health Card

Please note: Application will not be processed if all financial information is not included. Completed forms and supporting documentation can be sent via email or Canada Post or visit us in person at 3550 Portage Ave.