



DYMO Ministries, Inc.  
Since 1972

# DYMO Ministries

1433 Hamilton Ave NW  
Grand Rapids, MI 49504

## Financial Aid Worksheet

### DO NOT MAIL THIS WORKSHEET WITH COMPLETED FORM

There may be financial aid available to help with the cost of DYMO Programs from various sources. If you want to attend one of our programs, do not let finances get in your way.

#### Procedure:

##### 1. Determine Need

Determine your family's contribution to cover the fees.

##### 2. Ask Others for Financial Assistance

###### Amount paid by fundraising:

Many parishes sponsor fundraising events at the parish level or know of other sources of raising money for youth programs. Contact your parish Youth Minister for more information.

###### Check with Your local parish

Many parishes will provide financial assistance to its parishioners. Please contact your Youth Minister, Director of Religious Education or Pastor for more information.

###### Other Sources

This is an area to be left to your creativity. Local chapters of the Knights of Columbus, Veteran Organizations, and many other community organizations have money available or will help raise money for opportunities like the ones DYMO offers. Ask these organizations for a small donation and explain how you will benefit from the experience. If it fits their mission, they may help pay the registration fees. Don't let the suggestions above limit your creativity. You may offer to provide a service or share your experience afterwards.

Also consider: foundations, religious organizations, community organizations, civic groups, your employer or a parent' employer, those who purchase ads on your parish bulletin, etc. A well-written letter explaining your needs and the experience you hope to have can go a long way with those who care about you that may be willing to donate toward your experience at camp.

##### 3. DYMO Ministries

DYMO Ministries, Inc. has a limited amount of money set a side for full or partial grants. Realizing that individuals and parishes can offer differing amounts of support, DYMO Ministries will make individual monetary grants based on individual needs and available resources.

In order to receive any financial aid from DYMO Ministries a Financial Aid Request Form must be completed and turned in to the program registrar. Be sure to list contact information for your parish and list all other sources you checked with prior to requesting funds from DYMO, even if no funds were received. DYMO Ministries may contact the parish contact person to further discuss specific need.

###### Financial Aid Request Form

Complete one Financial Aid Request Form for each participant. Additional information about your situation can be attached to or written on the back of each form.

**Please turn in your completed forms early for the greatest availability of funds.**

Send completed copy to: DYMO Registration, C/O DYMO Ministries Inc, 1433 Hamilton Ave SW,  
Grand Rapids MI 49504

## Financial Aid Request Form

There may be limited financial aid available to help with the cost of DYMO Programs from various sources. If you want to attend Camp, do not let finances get in your way. Please refer to Financial Aid Worksheet for further instruction. Additional comments about your specific situation that you would like the committee to consider should be attached or written on the back of this form.

<b>Registrant Information</b>			
Name:		Date:	
Address:			
City:		State:	Zip Code:
Parent or Guardian Name:		Parent Signature (if under 18)	
Daytime Phone Number:	Evening Phone number:		Email Address:

<b>Cost of DYMO Camp Registration Fee (per camper):</b>	<b>\$410.00</b>
<b>Amount to be paid by family</b>	
<b>Amount paid by fundraising</b>	
<b>Amount paid by local parish</b>	
<b>Amount paid by Other Sources (list all attempted sources)</b>	
<b>Amount requested from DYMO Ministries</b>	

<b>Parish Information</b>		
Parish:		City:
Parish Contact Person:	Title:	Phone Number:
I have been contacted to make a contribution from the parish to the DYMO registration fee for the above named person. The amount our parish will contribute is written in the space above.		
Parish Contact Signature:		Date:
Comments:		

Additional comments the registrant would like considered by the Financial Aid Committee:

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**Non-discrimination Statement**

It is the policy of DYMO Ministries, Inc. that no person or group on the basis of race, color, religion, national origin or ancestry, age, sex, marital status, or handicap shall be discriminated against, excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination in any program or activity for which it is responsible.

**For DYMO Ministries, Inc Use Only**

**Candidate Information:**

Amount Requested: _____	Grade in current School Year _____ <input type="checkbox"/> Returning <input type="checkbox"/> New to DYMO Programs	Aid Received in Past Years _____
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Amount Granted: \_\_\_\_\_

Printed Name of Committee Members

Initial

Approval: yes no

_____	_____
_____	_____
_____	_____

**Comments:**

Date Communicated with Program Treasurer \_\_\_\_\_ by: \_\_\_\_\_

Date Communicated with Program Registrar \_\_\_\_\_ by: \_\_\_\_\_

Date Communicated with Recipient \_\_\_\_\_ by: \_\_\_\_\_

Process:  phone call  mail

This form shall be kept with financial records... (add directions here)