



Campership Assistance Request Form 2024

Berkshire Museum's 2024 Camperships are made available thanks to the generous support provided by an anonymous donor.

The Berkshire Museum makes every effort to address the needs of families and/or individuals applying for assistance.

Applying for financial assistance does not automatically guarantee that assistance will be granted, as the assistance will be based on the documented financial need and availability of resources of the Museum. The Museum reserves the right to deny or discontinue financial assistance at any time.

After completing your application form and attaching proper documentation, your request will be reviewed and, if necessary, you will be contacted by telephone with any questions we may have. A determination on your request will be made as soon as possible. You will be notified by phone as to the assistance granted.

If you need to contact someone regarding your application, please write to Betty Connally at bconnally@berkshitemuseum.org.

To apply for financial assistance:

- Please complete and return the attached application (two-sided) and required documents to:
Berkshire Museum, Attn: Betty Connally, 39 South Street, Pittsfield, MA 01201
- If you have questions about your application, please email Betty Connally at [**bconnally@berkshitemuseum.org**](mailto:bconnally@berkshitemuseum.org)
- Please notify the museum immediately if you should experience a change in your income status. Berkshire Museum will make an appropriate adjustment to your financial assistance.



BERKSHIRE MUSEUM

Campership Application Form

ALL APPLICATIONS ARE CONFIDENTIAL

Application Date: _____

Applicant (parent/guardian): _____

Home or Cell Phone () Email address: _____

Address: _____

City: _____ State: _____ Zip: _____

Applicant's Employer: _____ Supervisor: _____

Employer's Address: _____ Employer's Phone ()

Spouse's Name: _____ Home Phone ()

Address (if different): _____

Spouse's Employer: _____ Supervisor: _____

Employer's Address: _____ Employer's Phone ()

Dependent Children Living in Household:

Name	Age	Grade Entering Fall 2024
1.		
2.		
3.		
4.		
5.		

Other Persons Living in Household:

Name	Age	DOB
1.		
2.		
3.		
4.		

Name(s) of Dependent Child(ren) that will benefit from this assistance:

Camp(s) to be covered by this assistance (Choose up to two for each camper):

PRE-K & Kindergarten

Dino Discovery (July 1 -3, 5; 9am-12pm)

GRADES 1-2

Pond Camp (July 8-12, 9am-12pm)

Animal Adventures (July 8-12, 1pm-4pm)

Over The Rainbow (July 22-26, 9am-12pm)

Junior Engineering (July 22-26, 1pm-4pm)

Junior Archaeologist (July 29-August 2, 9am-12pm)

Junior Paleontologist (July 29-August 2, 1pm-4pm)

GRADES 3-6

Show Biz Camp (July 15-19, 9am-4pm)

Game Board (August 19-23, 9am-12pm)

CSI Monster Hunt (August 5-9, 9am-12pm)

Animation (August 19-23, 1pm-4pm)

Time Traveling Artists (August 5-9, 1pm-4pm)

GRADES 3-6

Junior Curator (August 12-16, 9am-12pm)

Manga Camp (August 12-16, 1pm-4pm)



BERKSHIRE MUSEUM

Monthly Household Income (designate type of income and amount received each month)

Wages \$ _____

SSI \$ _____

AFDC \$ _____

Unemployment \$ _____

Disability \$ _____

Child Support Income \$ _____

Total Monthly Income \$ _____

Please attach documentation from any source of income you are receiving (as marked above).

All Household Members who are working are asked to submit a copy of check stubs from the previous three weeks.

Have you received financial assistance in the past from the Berkshire Museum? Yes ____ No ____

If yes, when? _____

What type of assistance did you receive from the museum? (list program)

What was the total dollar value of the assistance you received in the past from the museum? \$ _____

The statements and responses I have given are true and correct.

Applicant's signature:

_____ Date: _____

**Please return the completed form and all necessary verification to:
Berkshire Museum, Attn: Betty Connally, 39 South Street, Pittsfield, MA 01201**