



Middlesex County Foundation, Inc.



# 4-H Camp Middlesex

1031 Erickson Road • P.O. Box 185  
Ashby, Massachusetts 01431-0185  
Phone: (978) 386-7704 • Fax: (978) 386-7046  
www.campmiddlesex.com

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## Campership Application Form

I am applying for:  4-H Campership  Financial Aid

Camp Registered for:  Day Camp  Overnight Camp

Your Name: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Camper's Age: \_\_\_\_\_ Camper's Date of Birth: \_\_\_\_\_

Number of Years the Camper has attended Camp Middlesex: \_\_\_\_\_

### **4-H Campership Applicants:**

4-H Member:  Yes  No If yes, number of years in 4-H: \_\_\_\_\_

4-H Member's Club Name: \_\_\_\_\_

4-H Club Leader's Name: \_\_\_\_\_

Projects currently enrolled in: \_\_\_\_\_

### **Financial Aid Applicants:**

How much assistance do you need? \_\_\_\_\_

Why do you need financial assistance? \_\_\_\_\_

### **Camper's Comments:**

Why do you want to go to Camp Middlesex? \_\_\_\_\_

\_\_\_\_\_

Camper's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please return all applications to: Camp Middlesex, PO Box 185, Ashby, MA 01431**  
**The deadline for applications is May 15<sup>th</sup> of each camp year.**  
**Applicants will be notified of their status in early June of each camp year.**