

INCOME-QUALIFIED PROGRAM

The Income-Qualified Program is for families in need of financial assistance for CA Camps. **This program is only available to people who live on or work full-time on property subject to CA's annual charge and whose household income is within the guidelines developed by HUD.** CA Camps does not accept DSS vouchers. Please allow 3-5 business days for approval. Call 410-715-3165 for more information.

Income-qualified guidelines for reduced rate Based on 2018 federal guidelines developed by HUD*

Family Size	Income Limit Camps 50% Reduction	Income Limit Camps 75% Reduction
2	\$54,550	\$26,700
3	\$64,750	\$32,990
4	\$71,900	\$39,270
5	\$77,700	\$45,560
6	\$83,450	\$51,840
7	\$89,200	\$53,020
8	\$94,950	\$54,200

*Guidelines subject to change.

Income-qualified requirements

To apply for the Income-Qualified Program, you must provide the following:

Incomplete packets will be returned, causing a delay in processing.

- 2019 Income-Qualified Application
- 2017 tax transcript from IRS (if registering before May 2019)
- 2018 tax transcript from IRS (if registering between May and August)
- \$50 nonrefundable registration processing fee (per child)
- Copy of birth certificate for child or children listed on your tax transcript
- 2019 Camp Registration Form

Guidelines and supporting documentation

- The reduction in rate is not applicable for registration processing fees, late payment fees, rejected electronic fees, returned check fees or any other promotions/discounts.
- Income-qualified eligibility must be renewed annually.
- Income-qualified eligibility is effective from the time of approval and is not retroactive.
- Income-qualified applications and supporting documentation must be submitted with registration. Regardless of the date of submission or approval, final payment is due Friday, June 7, 2019.
- Residents who receive government assistance (public housing, Section 8 housing, SSI, SSDI) may provide a current statement of benefits from the Howard County Government or appropriate governmental agency. **Those who solely submit the documentation listed above will only be considered for the 50% reduction in rates. In order to be considered for the 75% reduction, you must provide the required IRS tax transcript.**
- All other applicants must provide an official IRS computer-generated transcript of 2017 or 2018 tax return (it must include the annual income, number of exemptions, and must include the cover letter or be stamped or signed by the IRS). This transcript is available at no charge and can be requested by calling 1-800-908-9946 or online at IRS.gov.
- Applicants who do not live on CA-assessed property must complete and submit an Associate Verification Form.
- I understand that approval of this application depends on my ability to comply with Columbia Association's residency Income Verification Requirements.

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INCOME QUALIFIED FORM 2019

Effective Summer 2019

COMPLETED APPLICATION with supporting documentation should be mailed to:

Columbia Association Camps
6310 Hillside Court, Suite 100
Columbia, MD 21046

Name (head of household) _____

Phone number (primary) _____ **Phone number** (alternate) _____

Street address _____

City _____ **State** _____ **ZIP** _____

Annual gross income (from all sources) _____ **Family size** _____

Family members

All dependents listed below must be listed on the IRS tax printout.

01 Name _____ Date of birth _____

02 Name _____ Date of birth _____

03 Name _____ Date of birth _____

04 Name _____ Date of birth _____

05 Name _____ Date of birth _____

06 Name _____ Date of birth _____

I verify that the information I have provided on this application is correct and that the supporting documentation is valid. I further agree to notify Columbia Association should my income rise above the limits stated herein before my approved participation is up. I understand that failure to comply with these requirements will result in revocation of my participation privileges and will require payment at regular rates for privileges already used. I have read and agree to all the provisions on this application.

Head of household signature _____ **Date** _____

Approved (manager) _____ **Date** _____

Supplying false income tax information to Columbia Association is a crime punishable by law.

FOR COLUMBIA ASSOCIATION CAMP OFFICE USE

Approved Summer Camps 2019 at 50%

Approved Summer Camps 2019 at 75%

CA-assessed property (Please check appropriate box)

Yes No

Verified by _____