



# CHILDHOOD ARTHRITIS **CAMP** TRAVEL AWARD PROCESS

**The Arthritis Society offers awards of up to \$500.00 to help campers travel to camp. This award is intended to help families who may not otherwise have the means to travel to the camp or the bus drop-off and pick-up site.**

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**Submit application by email to [camp@arthritis.ca](mailto:camp@arthritis.ca)**

## **Eligibility Criteria:**

- ▼ The child must have been diagnosed with a form of childhood arthritis.
- ▼ The child must be under the age of 18 at the time they will attend the camp.
- ▼ The cost of travel would have prevented the child and, where relevant, members of his or her family/legal guardians, from attending the camp.
- ▼ In years where demand for the award from a province/territory exceeds the amount set aside, families/children who received the award in one of the two previous years will not be eligible.

## **Application Process:**

- ▼ A completed application form (attached) along with a formal written identification (indicating name and mailing address) must be submitted to the Arthritis Society. Applications can be submitted throughout the year. Please submit application at least 60 days/ two months prior to camp event date.

## **Review Process:**

- ▼ Senior management from the Arthritis Society's National Office will be appointed to review the applications and grant awards based on available funds.
- ▼ Applications will be anonymized to promote objectivity and protect privacy.
- ▼ Priority will be given to the families for whom travel presents the most significant barrier to attendance. The barriers to participation may result from:
  - Distance to be travelled;
  - Cost of travel (most economical mode);
  - Costs (travel, accommodation, meals) either for immediate family members to travel to camp or the bus drop-off/pick-up site or for costs for childcare if some children remain behind; or,
  - Other directly related costs, (e.g., for health or physical support services to enable the child with arthritis to travel).

## **Award Process:**

- ▼ The family will be advised of the outcome of their application at least one month prior to the event.
- ▼ The family must confirm in writing (email or post) within one week of notification that they will accept the award and their child(ren) will be attending camp.
- ▼ A cheque (not to exceed \$500) will be made available to the family.
- ▼ The family must inform the Arthritis Society if their child is no longer able to attend the camp.



# CHILDHOOD ARTHRITIS **CAMP**

## TRAVEL AWARD APPLICATION FORM

Name of child:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Name of person completing application:

\_\_\_\_\_

Relationship to child:

\_\_\_\_\_

Mailing address:

\_\_\_\_\_

\_\_\_\_\_

Email:

\_\_\_\_\_

Phone: (daytime)

\_\_\_\_\_

(evening)

\_\_\_\_\_

Does the child have a form of childhood arthritis? Yes

No

Which childhood arthritis camp is your child planning to attend?

Date:

\_\_\_\_\_

Location:

\_\_\_\_\_

Do you anticipate receiving any other funding to offset the cost of your child's travel to camp? Yes  No

If Yes, what amount do you anticipate receiving? \$ \_\_\_\_\_

What is the estimated cost to travel to the camp or bus drop-off and pick-up site?

\$ \_\_\_\_\_ (Please attach a completed Childhood Arthritis Camp Travel Cost Estimate form)

Has the child received a Childhood Arthritis Camp Travel Award from the Arthritis Society in the previous two years? Yes  No

If Yes, what year was the award received? \_\_\_\_\_

Would your child be able to attend camp without this financial support?

Yes  No

I confirm that this information is correct

Name:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

**Submit application by email to**  
[camp@arthritis.ca](mailto:camp@arthritis.ca)

**Please attach a statement identifying why participation at camp is important to your child and to other family members. Supporting statements from others involved with your child also may be attached.**



# CHILDHOOD ARTHRITIS **CAMP**

## TRAVEL COST ESTIMATE FORM

Name of child:

\_\_\_\_\_

How many people will be traveling to camp or the bus drop-off, including the child with arthritis? \_\_\_\_\_

Estimate of total costs to travel to and from event: \$ \_\_\_\_\_

Will the travel be via: Car  Bus  Train  Air  Ferry

If travelling by car: \_\_\_\_\_ km x \$0.42/km = \$ \_\_\_\_\_

If travelling by air, please explain why air travel is necessary:

Estimated accommodation costs, if relevant:

Number of nights: \_\_\_\_\_ Total: \$ \_\_\_\_\_

Estimated meal costs: \$ \_\_\_\_\_

Estimated out-of-pocket health and/or support costs for the child with arthritis:

\$ \_\_\_\_\_ (Please attach an explanation of what these costs are and why they are necessary)

Estimated other costs related to participation: (e.g., child minding, etc.)

I confirm that this information is correct

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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