



YEAR ROUND GROUP PROGRAM APPLICATION FORM

- 1) Before completing this application, please familiarize yourself with the Year Round Group Program Handbook.
- 2) Please any communication materials that highlight your programs or services with your application.

Please ensure your organization and the participants meet all the criteria noted below before proceeding with the application.

ORGANIZATION CRITERIA AND RESPONSIBILITIES: Please check where applicable ✓

- Group is a youth serving organization, agency or school.
- Group will select appropriate children/youth based on the "Participant Criteria" noted below.
- Group will select a minimum of 50 children/youth to participate in the program.
- Group will provide qualified staff for supervision of participants.
 - Minimum ratio of **1:10**
 - Staff are a minimum of **18** years of age
 - All staff accompanying the group must have a **current Police Security Check**
 - At least one staff member is to be certified with current **Standard First Aid and CPR**
- Group is able to attend and participate in an overnight camp experience (no day trips).
- Group staff will provide all supervision and care of children during programming time as well as overnight supervision in camp buildings and bunkhouses.
- Group Coordinator will help to coordinate, along with THCF staff, a pre-camp orientation meeting for children/youth and parents/guardians, as well as a meeting for Group Leaders/Staff to review policies, procedures and expectations.
- Group Coordinator will ensure all THCF Camp Forms (Participant Allergy/Medical Information Form and Release and Indemnity) are completed and submitted to the Foundation Camp within two weeks of trip dates.
- Group will provide liability insurance naming the Tim Horton Children's Foundation, Inc. (for Canadian Camps) or Tim Horton Children's Foundation (US), Inc. (for U.S. Camp) as "additional insured."

PARTICIPANT CRITERIA:

- Participants are from **economically disadvantaged** homes as outlined in the chart below.
- Participants are between 8 and 18 years of age.
- Participants are socially well adjusted and able to interact positively with peers and camp staff.
- Participants are not required to pay a fee for this experience.

OUR GUIDELINES

These guidelines are provided to help you determine if your participants meets our criteria.

The Tim Horton Children's Foundation uses a combination of the Low Income Cut-Offs (LICOs) as published by Statistics Canada and the Poverty Thresholds published by the U.S. Census Bureau to determine financial eligibility.

Total Family Size (adults + children)	Total Household Income
2 people	Less than \$30,000
3 people	Less than \$37,000
4 people	Less than \$44,000
5 people	Less than \$50,000
6 people	Less than \$57,000
7+ people	Less than \$63,000

FOR OFFICE USE ONLY:

Group Name: _____

Date application received: _____

Date application reviewed: _____

Notes:

Approved: YES NO

Adults _____ # Campers _____

Dates assigned: _____

Registration Manager: _____

General Manager: _____

PART 1: COORDINATOR INFORMATION

Please note that we require contact information for two coordinators on the application.

Organization Name: _____

Group Coordinator 1: _____

Title: _____ Phone: _____

Email: _____

Group Coordinator 2: _____

Title: _____ Phone: _____

Email: _____

Organization Address: _____

City: _____ Prov/State: _____ Postal/Zip Code: _____

Website of Organization: _____
(if applicable)

PART 2: ORGANIZATION INFORMATION

Please answer the following questions in point form.

Please briefly describe your organization's mission and objectives:

Please briefly describe the children/youth served by your organization and how they meet our criteria as stated on the front page of the application:

PART 4: PROGRAM EVALUATION AND PROMOTION

Will you be evaluating the impact this experience has on your participants following their trip to camp? If yes, please explain how you plan to do so.

Will you be promoting this partnership through your website or other media?

YES: Website Brochures/Newsletters Press Release Other

NO:

If "yes" please describe:

Website (if applicable): _____

Please Note: The Tim Horton Children's Foundation must approve any materials containing our name or logo.

PART 5: DECLARATION

We, _____ and _____ affirm that the information contained in this application is accurate and correct, to the best of our knowledge.

Group Coordinator 1:

Signature: _____ Date: _____
(First and Last Name)

Group Coordinator 2:

Signature: _____ Date: _____
(First and Last Name)