

## **Financial Aid Information - Sophia Fahs Religious Education Camp**

For those with significant financial need, aid is available through a variety of sources:

1. LIAC - The Long Island Area Council Board is able to award a limited amount of financial aid for children and youth attending Sophia Fahs Religious Education Camp.
2. Financial assistance is also available through most local UU churches/fellowships and/or societies.
3. In cases of extreme hardship, financial aid may be available directly from the Sophia Fahs Camp

To receive LIAC financial aid, youth or their parents must be members in good standing of a Long Island Area Council UU Society, as defined by each congregation. Consideration is given to families and youth active in their respective congregations.

**\*\*\*\* It is required that applicants requesting support, first seek financial aid from their congregations prior to receiving a LIAC award. \*\*\*\***

### **Information for Parents:**

1. Applications are available from your local DRE, minister or RE Committee Chair.
2. Please complete the LIAC Financial Aid application in FULL (\*\*you will need to make 2 copies) and send ONE COPY to the Camp Administrator, Allyson Barish (19A Lone Oak Dr. Centerport, NY 11721), additional contact details at bottom.
3. Please send the OTHER COPY of the application to the appropriate person at your local society, congregation, fellowship or church. The appropriate person may be your local DRE (Director of Religious Education), minister or RE committee chair.
4. \*\* NOTE: Priority will be given to those families that provide an explanation of extenuating circumstances to explain the need for financial aid, on page 2 of the application.

**Completion of the form without explanation will likely result in minimal or no support.**

### **Information for the DRE, minister or RE Chair:**

1. Please confirm receipt of the application for financial aid with the Camp Administrator. (Contact details below.)
2. When making your decision regarding aid, please be aware that LIAC will attempt to match the amount of money given by the local congregation (to a maximum of \$247). Since LIAC funds are limited, we encourage you to make the maximum award possible so that LIAC funds can be utilized for other families in need. Note that the base cost per camper is \$6; 7. Fee for preschool campers (with staff parent) is \$420.
3. Once you are able to determine the amount of aid that will be given to the family, please contact the Fahs Administrator. The congregational decisions regarding financial aid should be forwarded to the Fahs Administrator **no later than April 30th**. Please specify amount PER CAMPER, not per family.
4. Checks from the congregation should be payable to LIAC and sent to: LIAC c/o Allyson Barish, 19C Lone Oak Drive, Centerport, NY 11721 and **postmarked no later than May 14<sup>th</sup> to avoid late fees**. Please place "FAHS" and the family's name on the memo line.
5. If any questions arise, please contact the Fahs Administrator or Camp Directors. (Contact details below.)

**Fahs Administrator:** Allyson Barish  
Camp Director: Patsy Kaplan  
Camp Co-Director: Matthew Barish

**email:** Allyson.barish@gmail.com 516-429-5289  
email: ramabachi@aol.com 516-781-4319  
email: mabarish@gmail.com 631-470-9660

**Financial Aid Application**  
Long Island Area Council Programs

The Long Island Area Council Board is pleased to be able to award a limited amount of financial aid to their programs for children and youth: Coming of Age, UU Connect, Our Whole Lives, and Sophia Fahs Religious Education Camp. We require those seeking financial assistance to also consider seeking other sources of assistance, such as their local churches or societies.

We believe that participation in the Long Island Area Council Religious Education programs deepens a child's understanding and commitment to the larger UU community, thereby enriching each congregation's religious education program.

Youth or their parents must be members in good standing of a Long Island Area Council UU Society, as defined by each congregation. Consideration is given to families and youth active in their respective congregations. Financial aid will be applicable only for the program being applied for. **New applicants will be considered before those who have previously received LIAC financial aid.**

It is REQUIRED that applicants request financial aid from their congregations prior to receiving a LIAC award. All information, including the act of applying or receipt of a scholarship, will be kept in confidence.

NAME (PARENT OR GUARDIAN) \_\_\_\_\_ E-MAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ TEL (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

CONGREGATION AFFILIATION: \_\_\_\_\_  
Member \_\_\_\_\_ Non-member \_\_\_\_\_

PROGRAM: Sophia Fahs Camp

1. Have you sought financial aid from your congregation?  Yes  No (application will not be reviewed until this is completed)
2. How much financial aid do you expect to receive from other sources? \_\_\_\_\_ (from: \_\_\_\_\_)
3. Have you previously received financial aid from LIAC? \_\_\_\_\_ When? \_\_\_\_\_
4. Names and grade of child/children applying for LIAC program:  
Child 1 Name: \_\_\_\_\_ Grade: \_\_\_\_\_ | Child 3 Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Child 2 Name: \_\_\_\_\_ Grade: \_\_\_\_\_ | Child 4 Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**Please use reverse side of paper to explain any circumstances to be considered for financial aid.**  
**\*\*\* Completion of the form without explanation will likely result in minimal or no support. \*\*\***

**5. FOR SOPHIA FAHS CAMP APPLICATIONS:\***

\*Has your child/children attended Fahs camp before? \_\_\_\_\_ How many years? \_\_\_\_\_

\*Have you previously served as staff at Sophia Fahs? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Signature of applicant **X** \_\_\_\_\_ Date \_\_\_\_\_

\*\*\* For Sophia Fahs Camp Financial aid, you must make a copy of this application:  
Mail or E-mail completed application to:

**Original** to: Camp Administrator: Allyson Barish 19A Lone Oak Drive, Centerport, NY 11721  
email: sophiafahs@gmail.com Tel: 516-429-5289

**2<sup>nd</sup> Copy** should be sent to the appropriate person at your local society, congregation, fellowship or church. The appropriate person may be your local DRE (Director of Religious Education), minister or RE committee chair.

**Financial Aid Application (PAGE 2)**

**Long Island Area Council Programs**

**Please use this side of paper to explain any circumstances to be considered for financial aid.**

**\*\*\* Completion of the form without explanation will likely result in minimal or no support. \*\*\***