

2025 SPJST Campership Application

Through the generosity of our donors, SPJST can provide a limited number of camperships to people in financial need. Camperships are available to people based on the United States poverty guidelines outlined below. To help as many people as possible, each person is eligible for one campership in a calendar year. Camperships for youth programs will only be provided to residents of Texas.

		• Financial Eligibility •		
Household Size	100% Federal Poverty Guidelines	You are eligible for a campership up to 80% of the camp fee (150% of poverty level)	You are eligible for a campership up to 50% of the camp fee (200% of poverty level)	
# of Members	Annual Income	Annual Household Income	Annual Household Income	
1	\$15,650	\$23,475	\$31,300	
2	\$21,150	\$31,725	\$42,300	
3	\$26,650	\$39,975	\$53,300	
4	\$32,150	\$48,225	\$64,300	
5	\$37,650	\$56,475	\$75,300	
6	\$43,150	\$64,725	\$86,300	
7	\$48,650	\$72,975	\$97,300	
8	\$54,150	\$81,225	\$108,300	
			Age	e:
Camper Address:	Street	Apt #	City State	Zip
		IndependentlyGroup Hor		•
	_ _))	
Parent/Guardian Nam	e:		Marital Status:	
		Busine		
Name of Spouse:				
		Busine	ss Phone: ()_	
	Please List Children	ren and Other Dependents Livir	ng at Home ●	
Name:		Relationship to Camp	Relationship to Camper:	
		o list any extraordinary expens ge, etc. which place a burden or		

Income and Expenses

Please list the current household income source and amount of income before deductions such as taxes and social security. If you have more than one check from any of the following, please combine to indicate your total amount.

Yearly Househ	nold Income
Income Source	Amount
Wages/Salary	\$
Social Security	\$
Public Assistance	\$
Unemployment Compensation	\$
Child Support	\$
Pension or Retirement	\$
Camper Social Security Payment	\$
Other	\$
Total income for the year:	\$
Yearly Househo Expenses	-
Rent/Mortgage	\$
Medical Expenses	\$
Utilities	\$
Insurance	\$
Car Payment/s	\$
Total expenses for the year:	\$
llars can spread further when familie	experience camp regardless of financial challenges. es contribute what they can to the total cost of camp, the amount below you are able to pay towards the
ill many & Tatal	

SPJST strives to as: Our campership dol np, allowing us to awaı he total cost of camp.

Total amount you will pay: \$	Total campership amount requested: \$	
*** Please note: These a	amounts should equal the total camp fee amount. ***	
Signature of Parent/Guardian:	Date:	

Proof of Income

You must attach proof of income to the application. All information will be confidential.

Acceptable proof of income may include:

- W2
- SSI Award Letter
- Tax Return
- Bank Account Statement showing SSI monthly deposits (please black out account numbers)
- 3 Consecutive Pay Check Stubs

All campership applications will be kept confidential and reviewed internally by the campership committee. The campership committee reviews applications and makes decisions for camperships based on need and availability of funds.

Return application as soon as possible to: SPJST, Attn: Camperships, PO Box 100, Temple, TX 76503-0100. For more information, contact the State Fraternal Director at 254-773-1575, ext. 177.