

**SUMMER CAMP GRANT
APPLICATION FOR 2025**
Submission Deadline: June 1, 2025

**ASSURED LIFE
ASSOCIATION**

PLEASE NOTE ELIGIBILITY QUALIFICATIONS:

- Applicants must have a membership connection: members, children, or grandchildren of members, or sponsored through a Chapter.
- A copy of the camp brochure must accompany your application (including camp address, phone number and cost), and said camp must be a true camping experience.
- Travel expenses are not to be included in camp cost.
- **Check will be made payable to parent or guardian's name unless otherwise specified.**

Child's Name _____ Age _____

Parent/Guardian Name _____

Street Address _____

City/State/Zip _____

Parent/Guardian Telephone _____ Email _____

Certificate Holder's Name _____

Certificate No. _____ Chapter _____

Relationship to Child _____

Camp Name _____

Camp Begin/End Dates: _____ **Cost** _____

Maximum grant amount of \$100 per child

I am the parent or guardian of the minor child who is applying for an Assured Life Association Camp Grant and agree that Assured Life Association will not be held responsible for any accident or other occurrence enroute to or from the camp or while in attendance if this grant is awarded.

Signature of Parent or Guardian

Date

**Please email completed form and camp information to assuredservice@assuredlife.org
OR mail to: Assured Life Association, 6025 S. Quebec St. Ste. 320, Centennial, CO 80111
(Postmarked no later than June 1, 2025)**