



Mandell Jewish Community Center
 Zachs Campus 335 Bloomfield Avenue
 West Hartford, CT 06117

**Camp Shalom Fee Reduction Application – 2025
 ECC Summer of Wonder Fee Reduction Application – 2025
 Sports Jams Fee Reduction Application – 2025
 Indoor JCC Specialty Fee Reduction Application – 2025
 The Swim & Tennis Club Fee Reduction Application – 2025**

Please complete ALL information on this form. Applications **will not** be processed unless **all** requested information is provided and a complete copy of your most current Federal income tax return and copies of all W-2's are provided. Your application must be signed and dated. To be eligible for a fee reduction, applicant's account must be up to date. Fee reductions are granted annually. **All information is kept in strict confidence.**

PLEASE PRINT CLEARLY

Name of Applicant: _____

Spouse's Name (if applicable): _____

Address: _____ City: _____ Zip: _____

Email: _____ Phone: _____

Marital Status: Married Widowed Separated Divorced Single

Dependent Children: (under age 22)

Name	Relationship to Applicant	Age	Grade	Estimated # Weeks of Attendance

Are you currently a member of the Mandell JCC? Yes _____ No _____

I have submitted my application for:
 Camp Shalom ECC Summer of Wonder
 Sports Jams Indoor JCC Specialty
 The Swim & Tennis Club

[Please note: Financial aid awards are based on actual weeks of enrollment and the award amount may be reduced if actual weeks vary from the estimated weeks indicated above]

FINANCIAL INFORMATION: Please complete the following information request and submit this form along with the requested documentation. Applications **will not** be processed unless **all** requested information is provided.

Income:	Per 2024 tax return	Estimated for the 2025 year
Adjusted Gross Income		
Other untaxed income		
Child Support Received		
Social Security/Pension		
Total Income:		
Expenses:		
Mortgage/Rent		
Private School Tuition		
Other Loan Obligations		
Other Unusual Expenses <small>(please explain below)</small>		
Total Expenses:		
Assets:		
Balance cash, savings, & checking Investments (except family home), CD's, investments, etc.		

➡ Please provide any additional information that you think might be helpful in our evaluation.
PLEASE PRINT. (Attach additional sheet(s) as necessary.)

I/We have enclosed (please check):

- _____ **Complete** copy of **2024 Federal** (not State) tax return, **including W-2's**
- _____ Other documentation supporting reported revenue, e.g. Social Security income, welfare, food stamps, rent subsidies
- _____ Copy of Divorce Decree (if applicable for child support and/or alimony information)

I/We have answered the above questions to the best of my/our ability.

Signature

Date

Signature

Date

Please mail to: Mandell Jewish Community Center, 335 Bloomfield Avenue West Hartford CT 06117
Attn. Kim Corona Charron, Scholarship Coordinator **OR** email documents to kcharron@mandelljcc.org