2023 Care Camps Grant Application for COCA Members

Submission Deadline: March 31, 2023

On behalf of Care Camps, we are so grateful for the wonderful services, programs, and support your camp provides children living with cancer and their families.

PLEASE READ THE GRANT INFORMATION SHEET (especially the application requirements) before completing the questions below.

All the information requested in the application must be completed for consideration of funding. Your answers will remain confidential and used solely for the purpose of assessing, compiling and tracking data for our ongoing strategic planning.

Please contact me if you have any questions.
Thank you!
Lexi Bickford, Program Coordinator
lexi@carecamps.org
COCA and Other Affiliations

1. Are You a Member of COCA (Children’s Oncology Camping Association)?
   - Yes
   - No (STOP and go to www.COCA.org to join before completing this application.)

2. Does your camp currently have COCA Gold Ribbon Status (either legacy or accredited)?
   NOTE: For future reference, ALL CAMPS must have started the Gold Ribbon process by Dec 31, 2023, to receive grant funding from Care Camps. New Camps must begin within two years of joining COCA.
   - Yes
   - No

   If NO, please state your plans and projected date for achievement.

3. Has a representative from your camp attended a COCA annual conference or a regional meeting, either virtually or in person, in the past three years?
   NOTE: A representative from your camp must attend the COCA conference or a regional meeting at least once every three years to receive grant funding.
   - Yes
   - No

   If YES, please list conference/s (and dates) attended.

4. If a representative from your camp was not able attend the COCA annual conference or a regional meeting in the last three years, please state reason.
5. Does your camp belong to any associations (or organizations) other than COCA or ACA ((American Camp Association)?
   
   [ ] Yes
   [ ] No

   If YES, please list other memberships.
   
   

6. Has your camp received other quality endorsements and/or certifications?
   
   [ ] Yes
   [ ] No

   If YES, please list.
   
   

7. Is your camp, or the camp facilities you rent, accredited by the ACA?
   
   [ ] Yes
   [ ] No

8. Is Care Camps acknowledged and linked on your website?
   
   NOTE: A requirement for grant funding is to list Care Camps website on your website. Please add before submitting your application.

   [ ] Yes
   [ ] No

9. Please provide the contact information for the person responsible for your camp's marketing and communications.
   
   NOTE: Please review marketing requirements in the Grant Information Sheet.

   Name
   
   Email Address
   
   Phone Number
   

10. Does your camp agree to fulfill the marketing and communication requirements listed in the Grant Information Sheet?
   
   [ ] Yes
   [ ] No
Camp General Information

* 11. What is the operating name of the pediatric oncology camp you are requesting funding for?

* 12. What is the legal name of your camp?

* 13. What is your camp's EIN# (US) or BN# (Canada)?

14. What is your camp's website address?

15. Does your camp own or rent facilities?
   - [ ] Own
   - [ ] Rent
   - [ ] Other (please specify)

* 16. What is the total amount of funding your camp received from Care Camps in 2022 and what amount are you requesting for 2023?

  Received in 2022
  
  Requesting for 2023
17. Did any funding received from Care Camps in 2022 go towards Covid-related supplies?

- Yes
- No

If YES, what was the estimated amount?

18. If approved for Care Camps funding this year, will any of the funds go towards Covid-related supplies?

- Yes
- No

If YES, what is the estimated amount?

* 19. What is your Camp's geographical location, (i.e., WHERE YOUR CAMP IS PHYSICALLY LOCATED, not your office location)?

NOTE: Longitude and latitude are required to be included on our Care Camps online map.

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<tr>
<th>Site Name</th>
<th>Physical Address</th>
<th>City</th>
<th>State/Province</th>
<th>Zip/Postal Code</th>
<th>Longitude</th>
<th>Latitude</th>
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20. Who is the Executive Director or leader in charge of your camp?

| Name | Title | Mailing Address | City | State/Province | Zip/Postal Code | Business Phone | Contact Email |
|------|-------|-----------------|------|----------------|----------------|----------------|---------------|---------------|


21. List your camp's umbrella non-profit organization (if applicable).
Name
Mailing Address
City
State/Province
Zip/Postal Code
Contact/Title
Business Phone
Contact Email

22. If your camp receives a grant from Care Camps who should the check/cheque be payable to?

23. If your camp receives a grant from Care Camps, where should the check/cheque be delivered/mailed?
Name
c/o:
Mailing Address:
City
State/Provin
cZIP/Postal
PHONE:
ALT PHONE:
Camp Sessions

* 24. List the age ranges of your campers who have cancer or are in remission.

**NOTE:** Do not include parents or siblings.

Actual 2022 (youngest-oldest)

Projected 2023 (youngest-oldest)

25. In 2022, what services and programs did your camp provide? (Check all that apply.)

- [ ] Virtual Camp
- [ ] Camp in a Box
- [ ] In-Hospital Camp
- [ ] Family Retreat
- [ ] Overnight Residential Camp
- [ ] Bereavement Camp
- [ ] Sibling Camp
- [ ] Other (please specify)

26. For 2023, what services will your camp provide?

- [ ] Virtual Camp
- [ ] Camp in a Box
- [ ] In-Hospital Camp
- [ ] Family Retreat
- [ ] Overnight Residential Camp
- [ ] Bereavement Camp
- [ ] Sibling Camp
- [ ] Other (please specify)
* 27. Does your camp offer services or programs on a year-round basis?

- Yes
- No

If YES, please describe.

28. In addition to your camp's current programming, are there plans to add new or expand programs and services in 2023 to better support children with cancer and their families?

- Yes
- No, not at this time.

If YES, please describe.

29. If you answered YES to #28 above, what is the estimated cost to develop and implement for one year, AND to maintain annually?

30. Is your camp considered a 'day' or an 'overnight' camp?

- Day
- Overnight
- Both

* 31. How many total sessions did your camp offer in 2022 and how many are planned for 2023?

**NOTE:** Include all types of camps: day, night, week, weekend and camp-ins for your annual session tally.

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<thead>
<tr>
<th>Actual 2022</th>
<th>Planned 2023</th>
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32. How many total days and nights did your camp operate in 2022 and will operate in 2023?

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<th>Actual 2022 (days/nights)</th>
<th>Planned 2023 (days/nights)</th>
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33. What sessions are you planning for 2023?

**NOTE:** List dates and type (i.e., in-person, family retreat, sibling, bereavement, etc.).

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<td>Session 10</td>
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* 34. What is the unique total number of children WITH OR IN REMISSION FROM CANCER who attended your camp in 2022, and projected to attend in 2023?

**NOTE:** For children who attend more than one session, they are counted as ONE unique child. PLEASE DO NOT INCLUDE SIBLINGS OR PARENTS.

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<th>Actual 2022</th>
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<td>Projected 2023</td>
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* 35. What is the unique total number of siblings of children with cancer who attended your camp in 2022, and projected to attend in 2023?

**NOTE:** For siblings who attend more than one session, they are counted as ONE unique sibling.

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<td>Projected 2023</td>
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* 36. What is the unique total number of parents and grandparents of children with cancer who attended your camp in 2022, and projected to attend in 2023?

**NOTE:** For parents/grandparents who attend more than one session, they are counted as ONE unique person.

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<td>Projected 2023</td>
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* 37. Did your camp serve anyone else in 2022 and is your camp planning to serve others not listed in #34-36?

**NOTE:** Include estimated numbers and do not include campers with other medical conditions.

Actual 2022 (How Many?)

Specify who:

Planned 2023 (How Many?)

Specify who:

* 38. What were your camp's the total operating expenditures for 2022 and what are the projected expenditures for 2023?

**NOTE:** DO NOT include costs for programs related to other illnesses, 'Gift in Kind' support, or any fundraising salaries and expenses.

Actual 2022

Projected 2023

39. What was the total amount of your costs are covered through GIFT IN KIND donations in 2022 and are projected for 2023?

**NOTE:** DO NOT include programs related to other illnesses or any fundraising salaries and expenses.

Actual 2022

Projected 2023

* 40. What is the average **PER DAY** cost per child to attend your camp?

**NOTE:** To calculate use this spreadsheet.

Actual 2022

Projected 2023

41. For your camp's operating expenditures, what is the total cost related to the ownership of your facilities (i.e., taxes, repairs, maintenance, utilities, etc.)?

Actual 2022

Projected 2023

* 42. What percentage of your camp's 2023 budget does your grant request represent?

Use formula: Grant Request / Total Operating Costs + Gifts in Kind
43. Did your camp meet your fundraising goals for 2022?

☐ Yes
☐ No

If NO, what was the percentage of your fundraising goal achieved?
**Camp Staffing**

44. How many staff, including counselors, are required to run your camp's programs and services (both paid and unpaid)?

- Actual 2022
- Projected 2023

45. How many staff, including counselors, are paid for their services?

- Actual 2022
- Projected 2023

* 46. How many staff receive remuneration in excess of $100,000?

47. How many MEDICAL volunteers (not counted in #45) are involved with the operation of your camp?

- Actual 2022
- Projected 2023

48. How many NON-MEDICAL volunteers (not counted in #45) are involved with the operation of your camp?

- Actual 2022
- Projected 2023

49. What percentage of your camp's volunteers or counselors attended a pediatric oncology camp as a camper?

- Actual 2022
- Projected 2023
50. If grant funding is awarded, does your camp plan to use the funds for programs and services in 2023?

NOTE: Care Camps requires that all funding received is used exclusively for 2023.

- [ ] Yes
- [ ] No

51. Would your camp be willing to participate in Care Camps fundraising efforts, e.g., presenting at a state or regional meeting or being involved with a local fundraising project?

- [ ] Yes
- [ ] No

52. Would your camp be willing to host Care Camps Ambassadors (i.e., individual donors, board members, staff, KOA campground owners, etc.) for a day or specific event during your camp sessions this year?

- [ ] Yes
- [ ] No

If yes, please list contact person with email and phone number.
ADDENDUM: Capital Improvements Application (Questions 53-59)

THIS IS A SEPARATE APPLICATION. PLEASE ANSWER THE FOLLOWING QUESTIONS ONLY IF YOUR CAMP IS REQUESTING ADDITIONAL FUNDS TO PURCHASE SPECIFIC ITEMS TO IMPROVE YOUR PROGRAMS AND SERVICES.

Care Camps has a limited amount of funding available to help support the purchase of capital items or improvements, e.g., sports equipment, new mattresses, canoes, computer upgrades, first aid equipment, personal protection equipment, etc. Capital grants average $3,500 to $5,000.

NOTE: If awarded an additional capital grant, funds must be spent within 2023, and cannot be carried forward. Proof of purchase and proof of payment are required for cost reimbursement.

For this section, PLEASE DO NOT INCLUDE INFORMATION RELATED TO YOUR OPERATING GRANT REQUEST (QUESTIONS 1-52).

53. List the capital improvement item/s your camp is requesting funding in PRIORITY ORDER

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54. State how the capital improvement item/s (listed above) will improve your programs and services.

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55. What is the total cost of each capital improvement item listed above?

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56. What funding is being requested for each item listed above?

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<th>Item</th>
<th>Amount</th>
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57. What percentage of the total cost of each item listed above is your camp able to fund?

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<th>Item</th>
<th>Percentage</th>
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58. If Care Camps is unable to fund your request, will your camp proceed with the project?

- [ ] Yes, we will proceed regardless of Care Camps funding
- [ ] No, we will not be able to proceed without funding from Care Camps
- [ ] Not Sure

59. If you had one wish for a ‘big ticket’ item that your camp needs to improve your services and programs, what would it be?

NOTE: There are no guarantees we will be able to fulfill your wish and it would be helpful for us to know what is needed in case an additional funding opportunity arises.

Thank you for completing the application. Notification of grant awards will be announced by May 1, 2023, with checks/cheques delivered no later than May 15.