



Morgan Brooks Productions

aidthesilent
Camp Application

aidthesilent

Dear applicant,

Aid the Silent is dedicated to equip hard-of-hearing/deaf children/teens with the necessary tools and resources to help them find personal success. If you have been diagnosed with hearing loss and are seeking assistance to attend a faith-based camp or event, your parent/guardian must complete this application and supply the necessary documents in order to be considered.

Please note that application evaluation does not begin until all documents are complete and turned in. Once received, the approval process can take several weeks. You will be notified via email and official letter on the status of your application.

Camp Application

GENERAL INFORMATION

Child's name _____

School _____

Grade you just completed _____

T-Shirt size _____

Parent Email _____

Parent phone _____

Address: _____

City _____ State _____ Zip _____

Primary Language:

- English
- Spanish
- ASL
- Other _____

Applicant uses listening and spoken language as the primary mode of communication:

- No
- Yes

Accommodations needed:

- ASL interpreter
- Captionist
- Buddy System
- Other _____

Please attach audiogram. For any sponsorship to be considered, audiogram must accompany application.

Age when hearing loss was diagnosed: _____

If applicable, age at which applicant was fitted with hearing aid(s): _____

If applicable, age at which applicant received cochlear implant(s): _____

If applicable, age at which ASL was taught: _____

What other method(s) of communication and educational support service(s) are used in daily communications and educational settings? **Check all that apply:**

- Lip Reading
- Sign Language System:
ASL, signed English, finger spelling, etc.
- Cued Speech
- Note Taker
- Communication Access Real-time Translation (CART/Captioning)
- Oral Interpreter(s)
- Sign Language Interpreter(s)
- Auditory Listening Device, such as FM System

How did you hear about us? _____

Why should you be selected to attend camp? _____

Monies will fund camp fees only. All additional expenses will be the responsibility of the parent/guardian. Approved funds will be distributed directly to the service provider.

Uses sign language with:

- Teachers/professors
- Friends who are deaf
- Friends with typical hearing
- Other (please describe) _____

Preferred Camp:

- Deaf Camps
- Mainstreamed Camps
- Day camp
- Overnight Camp
- Please find me a camp

Preferred camp:

DISCLAIMER: Camps need to be faith-based.