



THE JEWISH EXPERIENCE GRANT

A Gift from the Jewish Federation of Omaha to Attend a Jewish Summer Residential Camp in 2017

The Jewish Experience Grant is a gift from the Jewish Federation of Omaha for children in grades 3-11 to encourage attendance at Jewish summer residential camp. Eligibility requirements for the Jewish Experience Grant include:

- 1) The total grant amount is \$2,000 with a maximum of \$1,000 per summer.
- 2) The grant is available for children currently enrolled in grades 3 through 11.
- 3) The camp session must be two weeks or longer.
- 4) The program must be a summer residential Jewish camp recognized by the Jewish Federation of Omaha.
- 5) The child must attend religious school and/or Friedel Jewish Academy, as a student, the year of the camp experience.
- 6) The family must be a contributor, in good standing, to the Annual Campaign of the Jewish Federation of Omaha
- 7) The family must be a resident of the Omaha metropolitan area.

To apply for the Jewish Experience Grant, complete this application in full.
For any questions, please call (402) 334-6574 or email alanpotash@jewishomaha.org.

The completed application must be returned by
March 1, 2017

Return by mail to:
The Jewish Federation of Omaha
333 South 132 Street
Omaha, NE 68154-2198

Application can also be emailed to alanpotash@jewishomaha.org

Payment of the grant is normally made directly to the camp.
If you have already paid camp costs in full, please provide a copy of the statement from the camp showing payment in full and you will be reimbursed directly.



333 South 132 Street, Omaha NE 68154-2198
(402) 334-6574 / FAX (402) 334-1330 / alanpotash@jewishomaha.org

Jewish Experience Grant Application - 2017
Application deadline is March 1, 2017. Return completed applications to
The Jewish Federation of Omaha, 333 S. 132 Street, Omaha NE 68154
Direct any questions to (402) 334-6574 or alanpotash@jewishomaha.org

Camper's Last Name		Camper's First Name		M.I.	
Preferred First Name		Gender		DOB	Age
Custodial Parent(s) Last Name		Custodial Parent(s) First Name			
Mailing Address					
City		State		Zip	
Home Phone #		Daytime Phone #			
Parent Email Address					
Religious and/or Day School Camper Attends	<input type="checkbox"/> Beth El <input type="checkbox"/> Beth Israel <input type="checkbox"/> Temple Israel <input type="checkbox"/> Friedel		Child's Grade Level		

CAMP INFORMATION

Name of Camp		Camp Location	
Mailing Address for Camp Payments			
Camp Phone #		Camp Website	
Length of Program		Session Dates	
Cost of Camp Tuition			\$

GRANT PAYMENT TYPE

First summer of \$1,000		Second summer of \$1,000	
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I hereby submit this application for my child for Jewish Federation of Omaha Jewish Experience Grant and agree to the requirements outlined on the cover page.

X _____ Date _____
 Signature of parent or guardian

The following to be completed by the Jewish Federation of Omaha

Confirmation of Annual Campaign pledge	Initials _____	Date _____
Confirmation of school enrollment	Initials _____	Date _____
Notification sent to family	Initials _____	Date _____
Notification sent to camp	Initials _____	Date _____