

# CYO/Camp Howard Club Sponsored Aid Request Form

(Use for Registration Fees paid for by Club Funds)

Please save and email, fax or mail completed form to:

CYO/Camp Howard  
847 NE 19th Avenue, Suite 385  
Portland, OR 97232  
503-231-9484 (main) -- 503-231-9531 (fax)  
[billing@cyocamphoward.org](mailto:billing@cyocamphoward.org)

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Child's First Name, Last Name

Date

Parent's First Name, Last Name

Parent's E-mail

Address

City

State

Zip

Aid Amount

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Club

Sport

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**Affidavit and Approval**

**Person Submitting  
Form:**

By checking the **Affidavit and Approval** box and submitting this form, I authorize the use of funds from the Club fund indicated above. If the Submitter is also the Payee, the email must be sent to at least two Club board members, while cc'ing [billing@cyocamphoward.org](mailto:billing@cyocamphoward.org). At least one of the board members must confirm approval via separate email stating their acceptance of this Club Sponsored Aid request by selecting Reply All.

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**QUESTIONS? Please contact the CYO Business Office for assistance.**