



Bringing Opportunity Home

Sponsor a Family

With our campers' health and safety in mind, we knew our traditional camp experience on Long Island wouldn't be possible this year, yet our commitment to the youth and families with whom we work remains as strong as ever. This summer we're adapting our approach and launching initiatives in three critical areas to provide direct support for every kid who planned to spend their summer with us – and to their families as well.

Summer 2020: Support for the Whole Family



Direct basic needs

Focused on food, household necessities and direct financial support.



Interactive engagement

STEM projects, physical fitness, art supplies and opportunities to engage with our team and other young people.



Social emotional and mental health services

Offering essential counseling and social emotional support services.

We're grateful to all of the generous donors whose continued support allowed us to pivot our programs this spring and continue to partner with Boston youth and families throughout this crisis. You make our work possible.

Summer 2020 will be unlike any other and we need your help to make these ambitious plans a reality. **Each contribution of \$5,000 will ensure a suite of services for a family in our community this summer.** The need continues to grow and we're looking to support as many families as possible. Please consider joining us in this effort by sponsoring one (or more) families today.



Sponsor a family today.

Complete the form on the following page.

Learn more about our work over the past year in our 2019 Annual Report, online now!

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Sponsorship Form

OFFICIAL SPONSOR LISTING NAME _____

(as it should appear in sponsorship listings)

SPONSOR CONTACT INFORMATION

NAME _____

COMPANY (if applicable) _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

EMAIL _____ PHONE _____

SPONSORSHIP AMOUNT

SPONSOR _____ **FAMILIES** (\$5,000 per family)

BILLING INFORMATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

CREDIT CARD Visa Mastercard Amex Discover

CARD NUMBER _____ EXP. DATE _____

CARDHOLDER'S SIGNATURE _____ CV CODE _____

AMOUNT \$ _____

CHECK Enclosed is my check for \$ _____, made payable to Camp Harbor View.

Camp Harbor View is a registered 501(c)(3) | Tax ID number 75-3235491

Please return this form to Jaclyn McGrory.

Email: jmcgrory@campharborview.org

Phone: 617-369-0010 | Fax: 617-848-5806

Address: Camp Harbor View c/o Connors Family Office
200 Clarendon Street, Boston, MA 02116

campharborview.org

