



## ***Cameron Can Foundation Grant Program***

In 2011, the first inaugural Cameron Can Benefit was established to help four-year-old Cameron Briggs Dominick and his family provide the medical care and therapies Cameron needed to survive and thrive. The evening was an incredible success raising enough money for the Dominick family to pay off all their outstanding medical bills and reinstate many therapies for Cameron.

Because we believe this cause is bigger than one family and one child, we started **Friends of Cameron**, a program which funds quality of life grants through **tax-deductible donations** for **Illinois** families that care for children with developmental disabilities and medical conditions, especially Hydrocephalus.

We are now in our fourth year of helping other families, to date 11 children have received a range of grants. Every March we host our annual fundraiser "Cameron Rocks On." The evening benefits our named grant families and provides a fund for year round giving to families who fall into the gap where financial assistance through typical channels is not an option, even though they are struggling to pay mounting medical bills.

The grants will provide stipends for families who do not qualify for Charity Care, DSCC, Medicaid and other financial assistance programs. The stipends may be used for a wide variety of supports and programs related to their family member with special needs.

Please read the information below and mail in the enclosed application.

***The Cameron Can Foundation is a 501(c)(3) non-profit charitable organization dedicated to ensuring children with long term neurological conditions can have a bright future. All contributions are tax-deductible to the extent allowed by the law.***



**In order to qualify for a grant, a family must:**

- Have a family member with Hydrocephalus or other related neurological condition such as Spina Bifida, at home in Illinois.
- Meet the guidelines for financial need. This grant is specifically for families who have been denied charity care/financial assistance from institutions, local, state and national programs.
- We request that parents obtain a letter of recommendation on behalf of your family member from a doctor, therapist or teacher on letterhead. The letter of recommendation should highlight financial need as well as any special challenges that the organization should be aware of. Letters of recommendation should be attached to the application and not mailed separately.
- Be willing to share images of your child and your family story to be used in marketing materials to promote the **annual Cameron Can Event - Cameron Rocks On**. The event is typically held each March on the Thursday before St. Patrick's Day.
- Be willing to pay it forward. The Cameron Can Foundation began with the principal that what we do for one, we should do for others. To us, that means it's the duty of grant recipients to accept the grant only if your family, friends and network will support your continued involvement and fundraising efforts for others. Examples include: securing family and friends to attend Cameron Rocks On events the year you receive the grant as well as future events; securing silent auction items, securing sponsors and/or promoting ongoing giving and support. We realize that this is a big ask and would be happy to discuss options with you understanding it's hard to commit when you don't know what your own circumstances may be.
- Provide a signed copy of the most recently filed (2011 preferred; 2010 acceptable) Federal tax return (IRS Form 1040, 1040-A, or 1040-EZ) that specifically lists the individual benefitting from the grant. If a Federal tax return was not required to be filed, please include a signed statement with explanation. If your child is a newborn we understand they will not yet be on your tax return.

**Please Note:** In order to apply for a child, the child must be listed as a dependent on your most recently filed IRS 1040. If the child is not listed on your most recently filed IRS 1040, then we need a copy of both your most recently filed IRS 1040 and the most recently filed IRS 1040 on which the child is listed as a dependent.



**Grant amounts:**

Grants will start at \$1,000 and increase based on monies raised at our annual fundraiser.

**Grant requests:**

You may apply to use the money for anything that improves the quality of life for your family member.

**Examples of possible uses of grant money:**

Adapted bicycle	Educational Books/Videos	
Summer Camp	Computer software	Education conference fees
Puzzles and games	Swimming lessons	Training Materials
Occupational therapy	Physical therapy	Educational Advocacy
Social skills training	Horseback riding lessons	Skating lessons
Sensory Integration	Speech therapy	Sports equipment
Vision services	Estate Planning	Art classes
Music classes/instruments	Respite care	

**Application process:**

To apply for funds, please complete the enclosed application form and return it to:

**The Cameron Can Foundation  
PO Box 373  
Riverside, IL 60546**

**Applications will be accepted via email to [info@cameron-can.com](mailto:info@cameron-can.com). If you are mailing the application please be sure to email us so we can ensure receipt. Applications will also not be accepted without a recommendation letter.** Feel free to explain any special circumstances regarding your need that may not be evident by completing the form.

Once your application is received, it will be reviewed to determine if you meet the above guidelines. Grants will be given throughout the year.



### **Deadlines for Grants**

**Provided year round, the March Primary Grant Recipients are named Fall of the preceding year.**

### **Recommendation Letter Guidelines:**

- A teacher, doctor, or therapist must write letters of recommendation.
- Letter must be written on school, hospital, doctor's office, or company letterhead.
- Letters must be written within the past six months.
- Letters should describe the family's financial need and/or child's diagnosis.
- Letter must be mailed with the grant application and not mailed separately.

### **Documentation:**

A family that receives money must send receipts or other proof of purchase (e.g. a form you may use to document your expenditures) for the agreed upon goods or services.

### **Thank you notes:**

We also request that you send a note of thanks explaining how the funds were helpful to you. These notes are very important for us to let the organization and donors know how beneficial these funds are to families.

### **Questions:**

**Please email your questions to [info@cameron-can.com](mailto:info@cameron-can.com) or call 773-425-9942 if you have any questions regarding this application.**

**You may also write us at:**

**The Cameron Can Foundation**

**PO Box 373**

**Riverside, IL 60546**

**[www.cameron-can.com](http://www.cameron-can.com)**

Before you mail your application, please make sure you have included the following items listed in the checklist. **Please note that incomplete applications will not be reviewed.**



## **Cameron's Friends Grant Checklist**

\_\_\_\_\_ Paper Application

\_\_\_\_\_ Recent photo of your child

\_\_\_\_\_ Recommendation letter from teacher or doctor

\_\_\_\_\_ Copy of most recent 1040 form



## *Friends of Cameron Grant Program*

### APPLICATION

*A letter of recommendation on behalf of your child from a doctor or teacher must be attached to this application.*

DATE: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_

CHILD'S BIRTHDATE: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DESCRIBE WHAT YOU ARE REQUESTING A GRANT FOR WITH A BRIEF DESCRIPTION OF NEEDS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AMOUNT YOU NEED BASED ON CURRENT COSTS RELATED TO YOUR CHILD'S CARE: \$\_\_\_\_\_

\_\_\_\_\_

Number of people (children and adults) living in your home including you: \_\_\_\_\_



\_\_\_\_\_ **List your total household income including all members** of the household and all sources of income (earnings, Social Security, child support, public assistance, etc.):

Please let us know if there are any special circumstances that affect your need for this grant.

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List any prior support received from other foundations with Amount(s) and Year(s)

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*I certify that the information above is true.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Please Print)

PLEASE RETURN THE APPLICATION FORM TO:

**The Cameron Can Foundation**

**PO Box 373**

**Riverside, IL 60546**

**[info@cameron-can.com](mailto:info@cameron-can.com)**