

WARREN COUNTY BOARD OF DEVELOPMENTAL DISABILITIES

FAMILY SUPPORT
410 S. EAST STREET
LEBANON, OHIO 45036
Phone (513) 228-6432

Email: Katrina.Steele@warrencountydd.org

Camp Request

****** ONCE REQUEST IS APPROVED YOU WILL RECEIVE A VOUCHER FOR SERVICES EITHER BY MAIL OR EMAIL. NO EXPENSE WILL BE HONORED WITHOUT PRIOR APPROVAL. ******

SERVICES REQUESTED BY: _____

INDIVIDUAL ENROLLED: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

IF NEW MAILING ADDRESS PLEASE CHECK THIS BOX []

PHONE NUMBER _____

EMAIL: _____

ONE CAMP REQUEST PER DIFFERENT CAMP NAME

CAMP NAME: _____

Total number of Vouchers _____ Price needed per voucher _____

Dates of Camp: _____

WHO IS TO BE PAID _____

If we are paying you a completed W9 form must be on file