



SUPPORT CAMP ERIN TORONTO 2022

DONATE OR SPONSOR CAMP ERIN TORONTO AND SUPPORT OUR FIRST EVER OVERNIGHT CAMP

IN PARTNERSHIP WITH HEART HOUSE HOSPICE!



Camp Erin Toronto is a free, overnight bereavement camp for youth who are grieving the death of a significant person in their lives. Children and teens ages 6 to 17 attend a camp experience that combines grief education and emotional support with fun, traditional camp activities, led by bereavement professionals and caring volunteers.

Camp Erin is offered free of charge to families, so we truly rely on your support. Individual donors, small businesses and large corporations provide both monetary and in-kind donations to ensure this valuable program is offered free of charge to all campers. Please consider becoming a Camp Erin Toronto sponsor or donate items on our wish list

DONATE TO SUPPORT A CAMPER:



FEED A CAMPER
\$25



SEAT ON THE BUS
\$50



CAMPER CARE KIT
\$100



CAMPER CABIN
\$150



COVER A CABIN
\$500



COVER A CAMPER
\$750

ITEMS TO DONATE:

- Gift cards to Michael's, grocery stores, Walmart, Amazon, or related supply stores
- Sunscreen
- Packaged healthy snacks
- New sleeping bags, pillows, and towels
- Insect repellent

For more information visit: <https://hearthousehospice.com/camperin/donate/>

SPONSOR CAMP AND HELP MAKE CAMP AWESOME FOR ALL!

\$400 Quench camper's and volunteer thirst on a warm summer day.



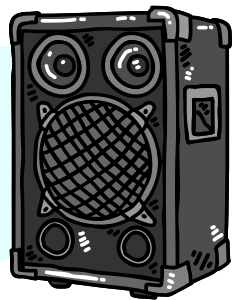
\$1,500 Provide comfort for bereaved youth



\$2,500

Sponsor a cabin of children and teens to attend Camp Erin for the entire weekend

\$500 Sponsor the DJ photo booth operator to lead a Saturday evening dance party



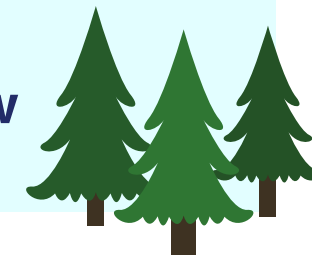
\$2,000 Sponsor Camp Erin Toronto's pre-camp event



\$750 Support the lodging, food, and all camp activities for 1 child to participate in Camp Erin



\$2,000 Sponsor 60 children to participate in high and low ropes courses



Count me in as a sponsor!

Name: _____

Phone: _____ Email: _____

Address, City, Province, Postal Code: _____

Please recognize me as: _____

Credit card #: _____ Exp. Date: _____

Name on card: _____

Card Type (circle): Mastercard Visa American Express Discover CVV/CSC (3 or 4 digit numeric code): _____

Signature: _____ Enclosed is my check for \$: _____

Would you like to become a yearly donor? Yes No

