

# AGENCY/ORGANIZATION AGREEMENT

This form should be completed by anyone sponsoring all or part of a camper's fee. Parents/guardians should feel free to copy this form if more than one Agency or Organization is contacted for assistance.

**Agency/organization should complete this form and mail it to:**

The Barton Center for  
Diabetes Education, Inc  
P.O. Box 356  
30 Ennis Road  
North Oxford, MA 01537

AGENCY/ORGANIZATION NAME: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

The above-named Agency/Organization will provide campership assistance for:

\_\_\_\_\_  
Camper name

In the amount of:

\$ \_\_\_\_\_

Our check will be forwarded to The Barton Center office on: \_\_\_\_\_

Representative's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**In some cases, multiple agencies will agree to sponsor a camper, creating an over-payment of the child's camp fee. The Barton Center must raise over \$275,000 annually to assist families with camp fees. Your support is vital to this effort. Please indicate your willingness to allow The Barton Center to use an over-payment to assist another child in need by checking the following:**

**We agree to allow The Barton Center to apply funds to a different camper in the event of over-payment.** (If box is not checked, over-payments of this type will be refunded to the agency only!)

*The Barton Center for Diabetes Education, Inc. is a non-profit organization. Charitable contributions to The Barton Center are tax-deductible as determined by the rules and regulations of the IRS.*

**The Barton Center for Diabetes Education, Inc.**

P.O. Box 356, 30 Ennis Road, North Oxford, MA 01537

Tel: (508) 987-2056 FAX: (508) 987-2002

[www.bartoncenter.org](http://www.bartoncenter.org)