



Dear Adopting Families,

Thank you for your interest in **The Gayle Wayland Memorial Adoption Fund**. The mission of this fund is **to glorify Jesus Christ by providing financial assistance and encouragement to adopting families who live in the Stanwood-Camano area**. Gayle Wayland was a woman who was passionate about adoption. She came alongside many adopting families and encouraged them through prayer, baby showers, financial gifts and excitement for and support of their adoption. She was a vital part of the adoption of several of her grandchildren and firmly believed that every child has a right to a family and to learn of God's great love for them. Her love of children and family was legendary. This fund seeks to honor her memory and to continue to spread her message of love for and commitment to every child as a "good and perfect gift" from above.

James 1:27 states, "Religion that God our Father accepts as pure and faultless is this: to look after orphans and widows in their distress." Adoption of a child mirrors the love God has for us as his adopted children through Jesus Christ. Whether you are adopting out of a desire to provide a home for a child, as a result of infertility, or for the joy of expanding your family, you are doing God's work...and we are excited for you!

In addition to filling out the attached application, the following are a few guidelines for applying for an adoption grant through **The Gayle Wayland Memorial Adoption Fund**:

- An approved home study is required for all applications. Please attach either the entire home study or the signature page indicating home study approval with your application.
- A letter of reference from one of the pastors of your church should be attached to your application.
- Applications cannot be accepted post-placement. Grants will be given only to adoptions currently in process.

We will make every effort to let you know of your grant status within 30 days of receipt of your application. Congratulations on this journey of love and thank you for doing the work of God through adoption. We are excited for you and will be praying that God will bless your adoption and your family.

In His love,  
The Gayle Wayland Memorial Adoption Fund Committee

**Please return to:**  
**The Gayle Wayland Memorial Adoption Fund**  
Camano Chapel  
867 South West Camano Drive  
Camano Island, WA 98282

*At Camano Chapel, we desire to be a friend to our community by being...*

**A HARBOR OF HOPE....SHINING LIGHT TO THE WORLD.**

*The Gayle Wayland Memorial Adoption Fund seeks to glorify Jesus Christ by providing financial assistance and encouragement to adopting families who live in the Stanwood-Camano Island, WA area.*

**ADOPTION GRANT APPLICATION**

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL: (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**MARITAL STATUS**

Married: \_\_\_\_\_ Single: \_\_\_\_\_

**NAMES AND AGES OF DEPENDENTS LIVING AT HOME:**

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**WHICH TYPE OF ADOPTION ARE YOU PURSUING?**

International: \_\_\_\_\_ If so, in which country? \_\_\_\_\_

Domestic: \_\_\_\_\_ Foster-to-Adopt: \_\_\_\_\_

Home Study Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_

**\*NOTE: Please attach either entire home study or signature page indicating home study approval with your application.**

Name and Address of Adoption Agency:

Caseworker Name and Phone Number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(\_\_\_\_) \_\_\_\_\_

WHAT ARE YOUR ESTIMATED ADOPTION EXPENSES?

Home Study Fee: \_\_\_\_\_ Legal Fees: \_\_\_\_\_  
 Agency Application Fee: \_\_\_\_\_ Medical Expenses: \_\_\_\_\_  
 Travel Expenses: \_\_\_\_\_ Misc. Expenses: \_\_\_\_\_

(Attach a list on a separate piece of paper if necessary)

TOTAL ESTIMATED ADOPTION EXPENSES: \_\_\_\_\_

Are there any time constraints to your Grant Application? No \_\_\_ Yes\_\_\_ If so, by what date? \_\_\_\_\_ (Please let us know if your need is urgent so that we can expedite your Grant Application review process)

Is this your first adoption? \_\_\_\_\_

Name of the church you attend: \_\_\_\_\_

**\*NOTE: Please include a letter of reference from one of the pastors of your church.**

Please include answers for the following questions to the supporting documents requested.

- Please provide us with a brief Statement of Faith, including how adoption conforms to this faith.
- Can you share what has inspired you to build your family through adoption?
- Are there any unique needs/special considerations you would like us to know in our review of your Grant Application?

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