

CAMPER APPLICATION FORMS

Must be completed at registration.



CAMPER APPLICATION

Camp/Session Choices Check the session dates desired, then write in the name of the camp that you want for that session.

Child #1 Name _____ Birth date ___/___/___

Week 1 May 24-28, 2010

Camp Name: _____ Location _____

Week 2 June 1-4, 2010

Camp Name: _____ Location _____

Week 3 June 7-11, 2010

Camp Name: _____ Location _____

Week 4 June 14-18, 2010

Camp Name: _____ Location _____

Week 5 June 21-25, 2010

Camp Name: _____ Location _____

Week 6 June 28-July 2, 2010

Camp Name: _____ Location _____

Week 7 July 5-9, 2010

Camp Name: _____ Location _____

Week 8 July 12-16, 2010

Camp Name: _____ Location _____

Week 9 July 19-23, 2010

Camp Name: _____ Location _____

Week 10 July 26-30, 2010

Camp Name: _____ Location _____

Week 11 August 2-6, 2010

Camp Name: _____ Location _____

Week 12 August 9-13, 2010

Camp Name: _____ Location _____

Child #2 Name _____ Birth date ___/___/___

Week 1 May 24-28, 2010

Camp Name: _____ Location _____

Week 2 June 1-4, 2010

Camp Name: _____ Location _____

Week 3 June 7-11, 2010

Camp Name: _____ Location _____

Week 4 June 14-18, 2010

Camp Name: _____ Location _____

Week 5 June 21-25, 2010

Camp Name: _____ Location _____

Week 6 June 28-July 2, 2010

Camp Name: _____ Location _____

Week 7 July 5-9, 2010

Camp Name: _____ Location _____

Week 8 July 12-16, 2010

Camp Name: _____ Location _____

Week 9 July 19-23, 2010

Camp Name: _____ Location _____

Week 10 July 26-30, 2010

Camp Name: _____ Location _____

Week 11 August 2-6, 2010

Camp Name: _____ Location _____

Week 12 August 9-13, 2010

Camp Name: _____ Location _____

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Payment - Amount and Method

Check one: Payment in full for all sessions desired Deposit of \$15 for each week desired

Check one: Program Registration Fee* \$30 Individual \$50 Household \$0 YMCA Facility Member

Optional: I would like to help another child attend YMCA Summer Camp by making a one-time donation of \$_____ to the YMCA Strong Kids Campaign.

TOTAL PAID \$ _____

Payment method (check one): Cash Check VISA Mastercard Discover AMX (Note: Faxed applications require deposit by credit card.)

For credit card deposits: Account number _____ Exp date: ___/___/___

Card Holder signature: _____

Facility Member of YMCA branch? Yes No If yes, what branch? _____

Participate in YMCA Before/After School Program? Yes No If yes, what school? _____

Participate in YMCA Preschool Program? Yes No If yes, what branch? _____

***If your camper is not a YMCA Facility Member, a camp program registration fee is due upon registering.**

Camper Information

Please note: If registering on-line, this information is also needed.
Please print, complete, and return to the YMCA.

Child #1 Name _____

Birth date ____/____/____ Race _____ Sex _____

Age on first day of camp _____ Grade in the fall _____

Child #2 Name _____

Birth date ____/____/____ Race _____ Sex _____

Age on first day of camp _____ Grade in the fall _____

Address _____

City _____ Zip _____

Phone Number _____

Parent/Guardian Information

1. Guardian Name _____

Relationship _____

Birth date (required) ____/____/____

Mailing Address _____

City _____ Zip _____

Place of Employment _____

Work phone _____

Home phone _____

Cell phone/pager _____

E-mail address _____

2. Guardian Name _____

Relationship _____

Birth date (required) ____/____/____

Mailing Address _____

City _____ Zip _____

Place of Employment _____

Work phone _____

Home phone _____

Cell phone/pager _____

E-mail address _____

Promotional Agreement

The YMCA **DOES NOT** have my permission to use photographs of my child(ren) in YMCA promotional material. _____ initial

Child(ren)'s Name(s) _____

For YMCA Office Use Only

Initial info entered into Unity:

Pick Up List _____ Health Info _____

Health Info Update (if applicable) _____ Date _____

Camper Pick-Up Information

I authorize only the people named below to pick up my child. Parent/guardian(s) listed above are authorized to pick up child(ren), unless otherwise noted. For your child's safety, he/she will not be released to anyone else. **All authorized persons must be 18 years of age or older.** No changes to this list will be made unless the parent or legal guardian whose signature appears below requests such changes in writing. Photo identification is required at pick up at all locations.

1. Name _____

Address _____

Work phone _____

Other phone _____

Relationship _____

2. Name _____

Address _____

Work phone _____

Other phone _____

Relationship _____

3. Name _____

Address _____

Work phone _____

Other phone _____

Relationship _____

4. Name _____

Address _____

Work phone _____

Other phone _____

Relationship _____

How did you hear about our day camp program? _____

Membership For All

YMCA programs and membership are affordable with YMCA Membership For All. **The YMCA is unique because your membership rates and program fees are based on total household income.** The YMCA is able to offer this sliding fee scale thanks to generous donors whose contributions to our Strong Kids Campaign enable us to live our mission of being open and accessible for all. Please ask front desk for details.

Important

In order to reserve a space in the camp or camps of your choice, a minimum of a \$15 **non-refundable** deposit is required for each week your child is registered for camp. **Outstanding balances must be paid by 8:00 pm on the Tuesday before the week the camp begins. Failure to meet payment deadlines could result in the loss of a camp reservation and deposit.** Additional information about camp deadlines and payment procedures are detailed in the "Camper Pack-it."

