

Day Camp



Camper Information

Last Name		First Name	MI	Birth Date	Age	Sex <input type="checkbox"/> M <input type="checkbox"/> F
Street Address		PO Box #	Apt #	City	State	Zip Code
()						
Home Phone			Camper Email (optional)			

Family Information

Camper Lives with: Both Parents Mother Father Other (specify): _____

YMCA Member #	YMCA Branch Name	()
1st Parent / Guardian & Relationship	Email	Cell Phone
Occupation	Business Name & Address	Work Phone
2nd Parent / Guardian & Relationship	Email	Cell Phone
Occupation	Business Name & Address	Work Phone
Other Emergency Contact Name & Relationship	Phone	Cell Phone

The information below is optional and used only for statistical purposes. Please check appropriate information. Thank you.

Racial/Ethnic Category: American Indian or Alaskan Asian or Pacific Islander African American
 Hispanic Caucasian Other _____

Participant Agreement & Refund Policy

Please READ & SIGN this statement.

I give permission for my child to attend camp. I agree to pay the balance of camp fees two weeks prior to my child attending camp. I understand I will receive a full refund minus \$100 deposit (per session) & \$22 YMCA Membership Fee if cancelled by June 1, 2010. No refunds after June 1st. I understand I will receive no refund if my child is sent home for any reason. I grant camp permission to take and publish photographs, videotapes, and recordings of the camper registered above. I acknowledge that you will be the sole owner of all rights arising out of their use for all purposes and that I shall receive no compensation for their use. A deposit of \$100 per session, plus a \$22 YMCA membership fee for non-members is required with my application.

Parent / Guardian Signature

Date

Camper's Last Name

Camper's First Name

Session Information - Check Sessions Attending

Week 1 June 28 - July 2 <input type="checkbox"/>	Week 2 July 5 - July 9 <input type="checkbox"/>	Week 3 July 12 - July 16 <input type="checkbox"/>	Week 4 July 19 - July 23 <input type="checkbox"/>	Week 5 July 26 - July 30 <input type="checkbox"/>
Week 6 August 2 - 6 <input type="checkbox"/>	Week 7 August 9 - 13 <input type="checkbox"/>	Week 8 August 16 - 20 <input type="checkbox"/>	Week 9 August 23 - 27 <input type="checkbox"/>	

Payment Information

Why 3 Prices?

Realizing that families have differing abilities to pay, we have a voluntary 3-Tier pricing program. Please take a moment to look at the rate descriptions and determine which of the three prices your family is able to pay for your child's experience.

This is strictly an honor system; select the fee you feel is appropriate and that is what you will pay. The program is voluntary, and in no way influences the experience children receive. Additional financial assistance is available and is based on Tier 1 price. Please call for more information.

Through generous donations to our Strong Kids Campaign, scholarships are available for Day Camp. Call our office for more information 845-858-2200.



Tier 1 - This price is the actual cost of camp for a child to participate. \$229 = _____

Tier 2 - Our partially subsidized fee for temporary or minor financial need. \$209 = _____

Tier 3 - Our heavily subsidized fee for those in need of more financial assistance. \$189 = _____

Horseback Riding Lesson - An hour and a half riding lesson at our ranch. \$35 = _____

Extended Hours - Gives parents the option to extend camp from 7:30 to 8:30 AM in the morning and 4:30 to 5:30 PM in the afternoon. AM PM \$35 = _____

YMCA Membership Fee for non-members \$22 = _____

Voluntary Contribution
 I want to help a deserving child attend camp; please accept my Strong Kids Campaign Donation: \$35 \$55 \$100 \$200 \$_____ = _____

Total \$ _____

(See requirement below) **Enclosed Deposit** - _____

Total Amount Due June 1, 2010 \$ _____

Minimum Deposit Required \$100 (Deposit per Session) x _____ Sessions + \$22 (YMCA Fee for non-Members) = \$ _____

Type of Payment Check / Money Order (Payable to New York YMCA Camp)
 Credit Card: MasterCard VISA American Express

Card Number _____ Verification Code (3 digits MC / Visa, 4 digits AmEx) _____ Expiration Date _____

Name on Credit Card _____ Signature _____ Daytime Phone _____

Mail Completed Form to:
 Camp Registrar
 New York YMCA Camp
 PO Box 622
 Huguenot, NY 12746

Questions? Contact our Camp Registrar
 Phone: 845-858-2200
 E-mail: camps@ymcanyc.org
 Fax: 845-858-7823

Cancellation Policy
 Full refund minus the \$100 deposit (per session) & \$22 YMCA Membership Fee if cancelled by June 1, 2010.

No refunds after June 1st.