

# 2019 YMCA SUMMER CAMP REGISTRATION

**We must have 2 weeks written notice prior to a child canceling camp or you will be charged the full amount**

*Please print all information clearly (blue or black pen only)*

**Camper's Name:** \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Grade (Fall 2019): \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Ethnicity (optional):

Caucasian \_\_\_\_\_ Latino \_\_\_\_\_ Asian \_\_\_\_\_ African American \_\_\_\_\_ Native American \_\_\_\_\_ Other \_\_\_\_\_

Child resides with: 1st Parent \_\_\_\_\_ 2nd Parent \_\_\_\_\_ Guardian \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

**1st Parent Name:** \_\_\_\_\_ Cell phone: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**2nd Parent Name:** \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## Emergency Contact Information

Is there a restraining order relating to the child's custody or release? Yes \_\_\_ No \_\_\_

If **YES**, we must have a dated and signed copy on file.

Please list names of individuals who are authorized to pick up your child from the center.

Name	Phone 1	Phone 2	Relationship to Child

## TRANSPORTATION:

Children must be 5 to ride the bus and be enrolled in Sprouts Camp.

**Please indicate the form of transportation, including pick up & drop off.**

Morning Bus Stop Number \_\_\_\_\_ Drop Off Location \_\_\_\_\_ Time \_\_\_\_\_

Afternoon Bus Stop Number \_\_\_\_\_ Pick Up Location \_\_\_\_\_ Time \_\_\_\_\_

(please initial) NO BUS TRANSPORTATION is necessary. I will be responsible to pick up and drop off my child at:

Drop Off Time \_\_\_\_\_ Pick Up Time \_\_\_\_\_

# 2019 PARENT AUTHORIZATION FORM

*Please print all information clearly*

Name of Camper: \_\_\_\_\_ Today's Date \_\_\_\_\_

The YMCA of Pawtucket, Inc. does not discriminate on the basis of race, color, sex, handicap, religion or national origin. The YMCA of Pawtucket, Inc. reserves the right at its sole discretion to refuse an application or dismiss a child from camp at any time. No refund will be made of fees if the child has attended any portion of the camping period. We do not pro-rate for partial weeks of attendance. We do not provide 1:1 services.

I give the YMCA of Pawtucket, Inc. permission to photograph and/or videotape my child for public relations and/or marketing purposes. Photos will remain archived at the YMCA of Pawtucket, Inc. and can be used for promotional purposes without notification.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I give permission for the YMCA of Pawtucket, Inc. to transport my child off camp property for the purpose of field trips and/or medical care. I understand that a schedule of events will be available to me and that all events are subject to change due to weather and/or scheduling conflicts without notice.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I have received a copy of the YMCA Summer Camp Parent Handbook.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I give permission for the YMCA of Pawtucket to search my child's belongings with the camper present when a health, well-being or safety of the camper or others require it.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I give permission to apply a generic sunscreen or bug spray to my child.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I give permission for my child to participate in ALL activities related to camps registered. I understand that this camp is primarily outside. Campers should bring sunscreen, water, a lunch, snacks and proper clothing with them daily.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I understand and accept these guidelines.

\_\_\_\_\_  
(Parent/Guardian's Signature)

# 2019 CAMPER INFORMATION FORM

*Please print all information clearly*

Name of Camper: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Is this your child's first experience with camp? Yes \_\_\_ No \_\_\_

Is your child water confident? Yes \_\_\_ No \_\_\_ skilled swimmer? Yes \_\_\_ No \_\_\_

Please check off what describes your child?

\_\_\_friendly      \_\_\_shy      \_\_\_active      \_\_\_aggressive

\_\_\_serious      \_\_\_easily embarrassed      \_\_\_easy going

\_\_\_enjoys outdoors      \_\_\_prefers to be indoors

Please let us know of any other information important for us to better serve your child and enhance the camp experience: \_\_\_\_\_

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The MacColl YMCA does not provide 1:1 services. **Does your child have any behavioral, cognitive, special needs or other considerations? (If yes, please list and speak directly to the Camp Director):** \_\_\_\_\_

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# 2019 CAMPER MEDICAL INFORMATION

*Please print all information clearly*

The medical background (**physical within the last year and immunizations**) of each camper is **required** as part of the camp's registration process. The camp director must be **advised** in writing of any condition that would limit the camper's ability to participate in any program. All medical information must be completed and no line left blank.

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Pediatrician's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Date of last physical \_\_\_\_\_ Tetanus Shot \_\_\_\_\_

List any current physical, mental or psychological conditions requiring medication, treatment or special restrictions or considerations while at camp. \_\_\_\_\_

Specific activities to be restricted for health reasons: \_\_\_\_\_

List allergies and dietary restrictions: \_\_\_\_\_

List of past medical treatments: \_\_\_\_\_

List all current medications: \_\_\_\_\_

Will your child need to take any prescription medications while at camp? Yes \_\_\_ No \_\_\_

If yes, please list all medications needed\*: \_\_\_\_\_

Does your child require an Epi-pen? \_\_\_\_\_ If yes, you must provide the camp with an Epi-pen with prescription to be kept at camp during your child's enrollment.

**\*Medication must be in the original container and be accompanied by a signed letter from the parent(s).**

I give permission for camp staff to administer medication as directed on the label.

\_\_\_\_\_  
(Parent/Guardian's Signature)

I authorize the camp management to act as the agent of the parents in any emergency situation or to administer basic first aid for the health and welfare of the camper involved. I am responsible for the expenses involved if the services of a physician or hospital are required. Please request a waiver for persons requesting exemption from medical treatment.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
Hospital preferred

**Please notify the camp director if your child is exposed to any communicable disease during the three weeks prior to attending camp.**

# 2019 SUMMER CAMP PAYMENT AGREEMENT

\_\_\_\_\_  
PRINT NAME OF CHILD/CHILDREN

\_\_\_\_\_  
DATE

## ***EXPRESS PAYMENT PLAN I - Automatic Bank Draft***

I authorize MacColl YMCA to draft for weekly camp fees including trip fees

\_\_\_\_\_  
PRINT NAME ON THE ACCOUNT

\_\_\_\_\_  
ROUTING & ACCOUNT # (ATTACH VOIDED CHECK)

\_\_\_\_\_  
NAME OF BANK

CHECKING  
 SAVINGS

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
DATE

## ***EXPRESS PAYMENT PLAN II - Credit Card***

I authorize MacColl YMCA to draft for weekly camp fees including trip fees

\_\_\_\_\_  
CREDIT CARD TYPE

\_\_\_\_\_  
YOUR NAME AS IT APPEARS ON CARD

\_\_\_\_\_  
CREDIT CARD #

\_\_\_\_\_  
EXP. DATE

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
DATE

## **Cancellation/Refund Policy**

- Registration fees are non-refundable
- Prior to June 1st, you may cancel camp in writing: If paid in full a refund will be issued less the \$15 registration fee.
- After June 1st, a 2 week written notice is required to cancel; A \$25 cancellation fee will apply each time a cancellation is requested, but are at the discretion of the camp director.
- Refunds are given for medical reasons when accompanied by a doctor's note and clear evidence that the child could not participate.
- Requests for refund must be made by, August 23, 2019, the last day of camp.
- Changes to this registration must be made by the Friday two weeks prior to the effective date.

## **Late Fees**

- A late fee will be assessed per child for pickup after 6pm; \$10 for the first 15 minutes and \$1.00 for every minute thereafter. Payment must be made at time of pickup.

The YMCA reserves the right to keep children from attending field trips due to inappropriate behavior and reserves the right to dismiss a child from the program when the child's behavior interferes with the rights of others. No refund will be issued if a child loses field trip privileges or is dismissed from camp for any reason.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

# 2019 SUMMER CAMP ENROLLMENT FORM

Campers Name

First: \_\_\_\_\_

Last: \_\_\_\_\_

Date of Birth \_\_\_\_\_

	Week 1 6/17 - 6/21	Week 2 6/24 - 6/28	Week 3 7/1 - 7/5 (closed 7/4)	Week 4 7/8 - 7/12	Week 5 7/15 - 7/19	Week 6 7/22 - 7/26	Week 7 7/29 - 8/2	Week 8 8/5 - 8/9	Week 9 8/12 - 8/16 (closed 8/12)	Week 10 8/19 - 8/23
<b>SPROUTS CAMP</b>										
Ages 5 - 6										
5 day - M,T,W,T,F										
Member: \$180 Non-Member: \$205										
3 day - M,W,F (Limited to 12/wk)										
Members: \$155 Non-Members: \$175										
2 Day - T,TH (Limited to 12/wk)										
Member: \$110 Non-Member \$125										
<b>CAMP CARE-A-LOT</b>										
Member: \$175 Non-Member: \$205										
Ages 7 - 8										
Cheer/ Dance Camp										
Sports Camp										
Nature & Beyond										
Zig Zag Zoom										
<b>U-GO-TO CAMP</b>										
Member: \$170 Non-Member: \$195										
Ages 9 - 12										
Girl Power Camp										
Cheer/Dance Camp										
Sports Camp										
Energize Camp										
<b>CAMP TRAILBLAZERS</b>										
Member: \$180 Non-Member: \$205										
*Plus trip fees \$15										
Ages 9 - 11										
<b>ADVENTURE CAMP</b>										
Member: \$180 Non-Member: \$205										
*Plus trip fees \$30										
Ages 9 - 11										
<b>EXPLORERS CAMP</b>										
Member: \$170 Non-Member: \$195										
*Plus trip fees \$50										
Ages 12 - 15										
<b>PATHFINDERS</b>										
Member: \$130 Non-Member: \$155										
Ages 12 - 15										
<b>LEADERS IN TRAINING</b>										
Member: \$145/wk - 2 wk sessions										
Non-Member: \$175/wk - 2 wk sessions										
Ages 13 - 15										

Tracking forms must be filled out for any changes made above. First two tracking form changes are FREE. There will be a \$15 fee for any additional forms.

Parent/Guardian's Signature

Date