

Stevens Point Area YMCA

2017 DAY Camp Registration/Application



- Fully complete** both sides of the Day Camp Registration, the Health History Form and include Immunization Record or complete the Immunization Record Form for each child along with a **\$30/\$50 per week non-refundable deposit or the full payment**. If program is full, your deposit will be returned and you will be placed on a waiting list. Incomplete registrations will not be processed.
- A Health History Form and Immunization Record or Form are required to complete your registration (Health History is required yearly and immunization record must be dated within two years of your last day at camp on this registration form). Forms can be downloaded at www.glacierhollow.com or picked up at the YMCA. Parents are responsible to inform us in writing of any changes to these forms including emergency contact and pick up information.
- Balance is due at least (2) two weeks prior to each camp week.** An unpaid balance may result in forfeiture of your child's registration and/or a \$10 late fee. Invoices will not be mailed. There is a \$10 service charge for transferring from one week to another.
- Approximately one week prior to each camp, you will receive general camp information, arrival and departure times and a list of things to bring.
- We will return all fees except your deposit if written cancellation is made two weeks prior to each week. After two weeks, refunds will not be available and parents will be held responsible for payment. There is a **\$10 service charge** for transferring from one week to another.

Participant Name _____ Birth Date _____ Age _____ M F

2017 DAY Camp Week	Camp Glacier Hollow (ages 7-12) \$170 Y-Member/wk \$180 General Public/wk Req. \$30 Deposit/wk	All Stars Great Escape at YMCA (ages 7-10) 5day= YM \$160 GP \$175 4day= YM \$140 GP \$156 3day= YM \$114 GP \$129 2day= YM \$82 GP \$92 Req. \$30 Deposit/wk	Great Escape at YMCA (ages 5-10) 5day= YM \$160 GP \$175 4day= YM \$140 GP \$156 3day= YM \$114 GP \$129 2day= YM \$82 GP \$92 Req. \$30 Deposit/wk	Specialty Day Camps Horse Camp YM \$305 GP \$325 Req. \$50 Deposit Teen Trek (ages 12-17) YM \$35 GP \$45 / Day Req. \$15 Deposit	Resident Camps & Trips Must Use Special Reg. Form	Total PAID Include Non-Refundable Deposit \$30 or \$50 Per Week	Bal. DUE
Week 1 June 8-9	<input type="checkbox"/> Camp 2.0 Fee: YM \$82/GP \$92 <input type="checkbox"/> Hot Lunch Opt +\$8	No Camp	<input type="checkbox"/> Camp Kick Off <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Fri. Noah's Ark Req. \$15 Deposit			
Week 2 June 12-16	<input type="checkbox"/> Sportsa'Palooza <input type="checkbox"/> Wed. O.N.+\$30/\$35	<input type="checkbox"/> All Star Try Outs <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Superhero Advs. <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F		LIT Day Training Flambeau Canoe Trip		
Week 3 June 19-23	<input type="checkbox"/> Zombie-Pirates <input type="checkbox"/> Wed. O.N.+\$30/\$35	<input type="checkbox"/> Football Frenzy <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Food Frenzy <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F		CIT Overnight Training Devil's Lake Rock Climbing/Caving Trip		
Week 4 June 26-30	<input type="checkbox"/> Carnival Adventures Wed. Xtreme Air Included Fee: YM \$200/GP \$210	<input type="checkbox"/> Basketball BreakOut <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Space is the Place <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Horse Camp 1 Beginner (ages 9-14)	Campers for LIFE		
Week 5 July 3, 5-7 (NO July 4)	<input type="checkbox"/> Party In The USA Fee: YM \$140/GP \$156 <input type="checkbox"/> Thus. O.N.+\$30/\$35 <input type="checkbox"/> Hot Lunch Opt +\$15	<input type="checkbox"/> All Star Break <input type="checkbox"/> M <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Stars & Stripes <input type="checkbox"/> M <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F				
Week 6 July 10-14	<input type="checkbox"/> Wet n' Wild I Thurs. Water Park Included Fee: YM \$190/GP \$200	<input type="checkbox"/> World Series <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F Mon. TRattler's Game + \$15	<input type="checkbox"/> Super Science <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	Overnight Horse Camp Opt. (see Wise Spirits)	Wise Spirits w/ Horse Opt.		
Week 7 July 17-21	<input type="checkbox"/> Hooked on Fishing Fee: YM \$180/GP \$190 <input type="checkbox"/> Thurs. O.N.+\$30/\$35	<input type="checkbox"/> Grand Slam <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Barnyard Palooza <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F Tues. Mulberry Farm+\$10		Beginning Advs. Porcupine Mtn. Backpacking Trip		
Week 8 July 24-28	<input type="checkbox"/> Dinner & A Play	<input type="checkbox"/> All Star Highlights <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Ooey Goey <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Horse Camp 2 Beginner (ages 9-14)	The Adventure		
Week 9 July 31- Aug 4	<input type="checkbox"/> Wet n' Wild II Wed. Water Park Included Fee: YM \$200/GP \$210 <input type="checkbox"/> Thurs. O.N.+\$30/\$35 <input type="checkbox"/> Hot Lunch Opt +\$18	<input type="checkbox"/> Wacky Olympics <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F Thurs. Skate City	<input type="checkbox"/> Wearable Art <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F Thurs. Skate City		Apostle Islands Sea Kayaking Trip		
Week 10 Aug 7-11	<input type="checkbox"/> Wild, Wild West <input type="checkbox"/> Thurs/Fri. Horse Ride +\$30 (ages 8-12)	<input type="checkbox"/> Wild World Of Sports <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Splish Splash <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	Camp SOAR For teens with mild cognitive disabilities. See special registration	Timbertop Camp		
Week 11 Aug 14-18	<input type="checkbox"/> Mythical Mysteries	<input type="checkbox"/> Grand Finale <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Jurassic Journey <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	Camp SOAR	Splash & Sport		
Week 12 Aug 21-25	<input type="checkbox"/> Outdoor ED-Venture <input type="checkbox"/> Wed. O.N.+\$30/\$35 <input type="checkbox"/> Hot Lunch Opt +\$18 Spec. Trips (ages 9-12) <input type="checkbox"/> Wed. Climb + O.N. <input type="checkbox"/> Tues./Thurs. Canoe Trip	No Camp	<input type="checkbox"/> Treasure Island <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> Horse Camp 3 Advanced See Preq. (ages 10-14)			
Week 13 Aug 28- Sept 1	<input type="checkbox"/> Camp Flashback <input type="checkbox"/> Wed. O.N.+\$30/\$35 <input type="checkbox"/> Hot Lunch Opt +\$18	No Camp	<input type="checkbox"/> Farewell Fun (5-6 year olds ONLY) <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	Wed. Night End of Summer Cook Out			

Check Enclosed Amount: \$ _____ Please Charge My: Visa MasterCard Discover Amount: \$ _____

Staff Notes: _____ Card #: _____

Health Form Received: _____ Exp. Date: _____ Signature: _____



Stevens Point Area YMCA 2017 DAY CAMP – Registration/Application

Fully complete both sides of the Day Camp Registration, the Health History Form and include Immunization Record or complete the Immunization Record Form for each child along with the required deposit(s) to:

**Stevens Point Area YMCA – Camp Registration, 1000 Division Street, Stevens Point, WI 54481 (715) 342-2980
Registration ?'s: Contact Child Development Office (715) 342-2999 or pmatthai@spymca.org www.glacierhollow.com
Financial assistance is available. Please request a Camp financial assistance application.**

Participant Name _____		Birth Date _____	Age at Camp _____	<input type="checkbox"/> M <input type="checkbox"/> F
Address _____				
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
Home Phone _____		Parent Email _____		
School _____		Grade Next Year _____		
Are there any medical, custodial, physical, behavioral conditions or special needs that we should be aware of now? _____				
First Parent Name _____		Second Parent Name _____		
H # _____ Cell or Work # _____		H # _____ Cell or Work # _____		

PARENT/GUARDIAN CONSENT and WAIVER & RELEASE OF LIABILITY

____ Initial **Section #1: REASONABLE ACCOMMODATIONS CLAUSE:** Children with special needs or challenges will be accepted provided that "reasonable accommodations" can be made for their participation in the program and/or the child's participation does not require an inordinate amount of staff time that would not allow for the safety and welfare of the other children in the program. I understand that if my child requires an unusual amount of one-on-one attention, whether due to special needs or behavior, my child may be removed from the program without refund.

____ Initial **Section #2: MEDICAL RELEASE:** In the event I cannot be reached, I give consent for YMCA staff to act on my behalf in granting permission for my child to receive emergency treatment. I will be responsible for the payment of all medical services rendered.

____ Initial **Section #3: RELEASE FROM LIABILITY:** I understand that all reasonable safety precautions are taken by the YMCA in the operation of its facility, equipment, and programs. However, participants and parents of children must recognize and accept that there are inherent risks when choosing to participate in day camp or any YMCA program; risks that could cause sickness, injury or death. I agree that my child's participation in the YMCA programs shall be undertaken at his/her sole risk, and that the YMCA and Camp Glacier Hollow, its directors, employees, volunteers, and agents shall not be liable for any claims, injuries, damages, losses, diseases, wrongful death, actions or causes of action whatsoever, to my child or his/her property, arising out of or connected to participation in Day Camp including but not limited to transportation services, camping, canoeing/kayaking, hiking, swimming, biking, rock climbing, fishing, horseback riding/grooming, and other camp activities. I agree to hold harmless and indemnify the YMCA and Camp Glacier Hollow, its directors, employees, volunteers, and agents from any and all liabilities and claims resulting from participation in this program.

____ Initial **Section #4: PHOTOGRAPHIC/MEDIA RELEASE:** I give my permission for my child to appear in media coverage approved by the YMCA and for the YMCA to use photographs and video of my child for promotional purposes and social media.

____ Initial **Section #5: FIELD TRIP & TRANSPORTATION PERMISSION:** I give permission for my child to participate in walking, bus and YMCA Van field trips. I give permission for my child to be transported for field trips or any regularly scheduled vehicle transportation.

____ Initial **Section #6: SUNSCREEN/REPELLENT:** I give permission for my child to use sunscreen (NO-AD SPF30) and insect repellent (OFF Skintastic with 5% DEET) provided by the YMCA and/or the brands listed here (to be provided by me) and for my child to receive application assistance as needed. Sunscreen _____ SPF _____ Insect Repellent _____ DEET% _____

____ Initial **Section #7: PARENT HANDBOOK:** I have had an opportunity to review the parent handbook and policies of this child care center/day camp and a summary of the WI Rules for Licensing Child Care Centers. I have read the information and agree to abide by the policies and procedures therein.

____ Initial **Section #8: Pets:** I have been informed of the pets in the center and their degree of contact with my child. I will be informed by the YMCA if pets are added prior to the pet's addition to the center.

____ Initial **Section #9: PARTICIPANT ENROLLMENT ACCEPTANCE:** I hereby apply for a reservation for my child as a program participant. I agree to pay the total camp fee on or before the payment due date. Failure to pay by the due date may forfeit my application and deposit. Furthermore, if my child is forced to leave the program due to illness, injury, or inappropriate behavior a refund may not be available. Children must be picked up from camp at 6:00pm or I understand that an overtime fee of \$5 for every additional 15 minutes will be charged. YMCA membership must be valid at the time of registration and maintained through the program dates to receive member rates.

____ Initial **Section #10: ACCURATE/COMPLETE INFORMATION:** I hereby state that the information is accurate and complete. I understand that it is my responsibility to provide any changes/updates regarding emergency and health information to the YMCA. I further understand that failure to provide accurate, complete, and updated information may jeopardize my child's registration and/or participation in YMCA programs.

I have carefully read and initialed each of the above parent/guardian consent sections. I fully understand that by signing this form I have given my parent/guardian consent for my child on all sections contained within.

Participant Name – Please Print

Parent/Guardian Signature

Date