



Stratford YMCA Summer Camp 2010 Registration Form



Please complete a separate form for each camper and return form with paid camp deposit. (PLEASE PRINT)

Camper Information:

Last Name _____ First Name _____

Address _____ City _____ Zip _____

Date of Birth _____ Grade (as of 9/2010) _____ T-Shirt Size _____ Gender: M or F

Contact Information:

Mother/Guardian _____ Daytime Phone _____

Father/Guardian _____ Daytime Phone _____

Email Address (for YMCA use only) _____

Camp Fees: (Circle your selection)

FM = Facility Member

NM = Non-Member

Session I (6/28-7/9)	
Camper	\$250 FM / \$285 NM
CIT	\$170 FM / 190 NM
AM Care	\$55 FM / \$70 NM
PM Care	\$55 FM / \$70 NM

Session III (7/26-8/6)	
Camper	\$250 FM / \$285 NM
CIT	\$170 FM / 190 NM
AM Care	\$55 FM / \$70 NM
PM Care	\$55 FM / \$70 NM

Session V (8/23-8/27)	
\$135 FM / \$155 NM	
AM Care \$35	
PM Care \$35	

Session II (7/12-7/23)	
Camper	\$250 FM / \$285 NM
CIT	\$170 FM / 190 NM
AM Care	\$55 FM / \$70 NM
PM Care	\$55 FM / \$70 NM

Session IV (8/9-8/20)	
Camper	\$250 FM / \$285 NM
CIT	\$170 FM / 190 NM
AM Care	\$55 FM / \$70 NM
PM Care	\$55 FM / \$70 NM

A non-refundable \$50 deposit per session is due at time of registration

Deposit and Payment Policy:

A non-refundable \$50 deposit per session is due at time of registration. Deposits will be credited towards each session's balance. In case of cancellation, deposits may only be transferred to another session of camp and are non-transferable after June 1st. The full remaining balance is due on the dates stated in your brochure. Failure to pay will result in loss of camp spot and deposit fee. Financial assistance is available to those who qualify and all applications must be turned in by June 1st.

Important Camp Information:

- A parent information packet will be sent out prior to the start of camp. This will give you information on field trips and what to bring, and what not to bring to camp each day.

I hereby give permission for my child to participate in all activities that are part of the Stratford YMCA program. I understand the risk associated with camp activities in which my child is a participant and hold the Stratford YMCA, Central Connecticut Coast YMCA, its employees, representatives, agents, and assigns from any and all claims whatsoever against said parties resulting from or caused by my child's participating. I further grant permission for my child to be transported in the YMCA authorized vehicles, and for my child to walk to local areas offsite for program activities or field trips. I also grant permission for any pictures taken of my child while at camp to be used for publicity and promotional purposes.

Parent / Guardian Signature: _____

Date: _____