



Tri-County YMCA Holiday Camp Registration Form

PLEASE CHECK IF THE CHILD IS A: YMCA Member OR Program Participant

CHILD 1:

First _____ Last _____

Birthdate ___/___/___ Age _____

Gender _____

School Attending _____

Special Conditions/Needs /Medications _____

Allergies _____

CHILD 2:

First _____ Last _____

Birthdate ___/___/___ Age _____

Gender _____

School Attending _____

Special Conditions/Needs /Medications _____

Allergies _____

Parent/Guardian Information

1. Guardian Name _____

Relationship _____ D.O.B. ___/___/___

Address _____

City _____ St _____ Zip _____

Primary Phone _____

Alternate Phone _____

Place of Employment _____

Email Address _____

2. Guardian Name _____

Relationship _____ D.O.B. ___/___/___

Address _____

City _____ St _____ Zip _____

Primary Phone _____

Alternate Phone _____

Place of Employment _____

Email Address _____

Child Pick-up Information

Parent/guardian(s) listed at the left are authorized to pick up child(ren), unless otherwise noted. You may also authorize the people named below to pick up your child(ren). For your child's safety, he/she will be released ONLY to those listed on this page. Changes to this list must be made in writing and may only be done by the parent or legal guardian.

1. Name _____

Address _____

Primary Phone _____

Alternate Phone _____

Relationship _____

2. Name _____

Address _____

Primary Phone _____

Alternate Phone _____

Relationship _____

3. Name _____

Address _____

Primary Phone _____

Alternate Phone _____

Relationship _____

TALENT RELEASE FOR PHOTOGRAPHY, VIDEOTAPE, AND AUDIO PRODUCTIONS

I hereby release the Tri-County YMCA from any forms of remuneration involving the current or future use of photographs, videotapes, or audio recordings for which I have performed.

This statement is hereby acknowledged and agreed upon by me with the full understanding that any photographs, video, or audio tapes will be freely used by the Tri-County YMCA for public display in either printed or electronic material for the purpose of furthering the business of the Tri-County YMCA.

Signature: _____ **Date:** _____

PAYMENT POLICY

Please read and initial the following:

_____ I, _____, (parent(s) responsible for payment) hereby agree to accept full responsibility for all fees required for my child(ren) to attend the Tri-County YMCA Holiday Camp program.

_____ Payment is due the day your child(ren) attends camp.

_____ Parents arriving after 6:00 pm to pick up their child(ren) will be charged a late fee of \$1.00 per minute per child. This fee will automatically be charged to the account.

*If there are extenuating circumstances, please discuss this with the Executive Director to see if alternative arrangements can be made.

* Credit card payment is available upon request. Please see the staff at the Courtesy Desk for the paperwork.

Signature: _____ **Date:** _____

HOLIDAY CAMP FEES

With the generous support of local donors during our Annual Campaign, the Tri-County YMCA is able to provide a pricing structure based on financial need. This structure will follow the free/reduced school lunch program. Please indicate which category applies to you:

Regular Lunch at School: _____ Reduced Lunch at School: _____ Free Lunch at School: _____

I, _____, hereby give the Tri-County YMCA authorization to contact my child's school to verify the type of financial assistance I receive. I also give permission to the school corporation to release the information to the Tri-County YMCA.

Signature: _____ **Date:** _____

Holiday Camp Prices:

YMCA Members:

Regular Lunch at School: \$18.00 day (1-4 days) / \$80.00 a week (5 days) per child
Reduced Lunch at School: \$12.00 a day (1-4 days) / \$54.00 a week (5 days) per child
Free Lunch at School: \$6.00 a day (1-4 days) / \$27.00 a week (5 days) per child

Program Participants:

Regular Lunch at School: \$22.00 a day (1-4 days) / \$96.00 a week (5 days) per child
Reduced Lunch at School: \$14.00 a day (1-4 days) / \$64.00 a week (5 days) per child
Free Lunch at School: \$7.00 a day (1-4 days) / \$32.00 a week (5 days) per child

****For the Regular Lunch at School Camp Price, we offer a Multiple Child Discount of \$1.00 off per child per day.**

****Parents need to provide a lunch, drink, and snack for their child(ren) each day. Meals are not provided.**