

Registration Form **2022 YMCA Camp YOMECA** [MUST register by Wednesday of the following week, pending availability]

One form per child, please print/complete and return to Raritan Valley YMCA, 144 Tices Lane, East Brunswick, 08816 (P)732 257 4114 (F)732 257 5762

## Camper Information

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender F\_\_ M\_\_

Age as of 7/1/22 \_\_\_\_\_ Grade as of 9/22 \_\_\_\_\_

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

City/Zip \_\_\_\_\_

### Parent/Guardian (1-Primary)

Full Name \_\_\_\_\_ D.O.B \_\_\_\_\_

Primary Phone # \_\_\_\_\_

Alternate# \_\_\_\_\_ Employer \_\_\_\_\_

Primary Email (required): \_\_\_\_\_

(Email is our primary method of communicating camp information, schedules, and last minute changes during the summer. Note that invoices are ONLY sent to the primary email.)

### Parent/Guardian (2-Secondary)

Full Name \_\_\_\_\_ D.O.B \_\_\_\_\_

Primary Phone # \_\_\_\_\_

Alternate# \_\_\_\_\_ Employer \_\_\_\_\_

Secondary Email (required): \_\_\_\_\_

How did you learn about Camp YOMECA? \_\_\_\_\_

### Additional Authorized Contacts (Required)

In case of emergency, if after both primary guardians cannot be reached, please list two additional people who can be contacted and would be authorized to pick up your child. (Photo ID required)

1. Name \_\_\_\_\_

Phone # \_\_\_\_\_ Relation \_\_\_\_\_

2. Name \_\_\_\_\_

Phone # \_\_\_\_\_ Relation \_\_\_\_\_

### Non-Authorized Contacts

Please list anyone who is not authorized to contact your child at any time (provide legal documents if it is a parent).

1. Name \_\_\_\_\_

Phone # \_\_\_\_\_ Relation \_\_\_\_\_

2. Name \_\_\_\_\_

Phone # \_\_\_\_\_ Relation \_\_\_\_\_

### Camper Friend Request

\_\_\_\_\_

(Both friends must request each other and be in the same camp.)

## Health History

Allergies: \_\_\_\_\_

Dietary Restrictions: \_\_\_\_\_

Current of past medical treatment that would affect your child's day at camp: \_\_\_\_\_

Activities your child should be restricted from: \_\_\_\_\_

Any physical, mental, or psychological conditions requiring medication, treatment, or special restrictions or considerations while at camp? (If we can address any further needs to help your child be successful at camp, a separate letter is encouraged): \_\_\_\_\_

List any current medications: \_\_\_\_\_

Medication Allergies: \_\_\_\_\_

*Medications must be in original container accompanied by a Permission to Medicate form with written instructions. Ex: Epi pen must be in original container. Campers must not carry medication at any time.*

### Current Immunizations (Required)

Date of last tetanus shot: Month: \_\_\_\_\_ Year: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_

Group policy #: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

This health history is correct as far as I know and my school-age child has vaccination records on file with the NJ Board of Ed, **OR** I exempt my child from vaccinations due to the following reasons:

I also attest my child is in good health and has permission to engage in all the normal activities and trips of camp in the care of the camp staff.

### Permission to Treat/Informed Consent:

If I cannot be reached in an EMERGENCY, I hereby give permission to the medical personnel selected by the Y to transport, hospitalize, and secure proper treatment, order x-rays, routine tests, injections, anesthesia, or surgery, and to release any records necessary for insurance purposes for my child as named above, including release any records for treatment and referral.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Weekly Sessions	1 June 27- July 1	2 July 5-8 Pro- rate	3 July 11-15	4 July 18-22	5 July 25-29	6 Aug 1-5	7 Aug 8-12	8 Aug 15-19	9 Aug 22-26	10 Aug 29- Sept 2	Total Weeks
Achievers (grades K-1)	\$350	\$300	\$350	\$350	\$350	\$350	\$350	\$350	\$350	\$350	
Achievers (grades 1-3)	\$350	\$300	\$350	\$350	\$350	\$350	\$350	\$350	\$350	\$350	
Achievers (grades 3-5)	\$350	\$300	\$350	\$350	\$350	\$350	\$350	\$350	\$350	\$350	
Adventurers (grades 5-7)	\$350	\$300	\$350	\$350	\$350	\$350	\$350	\$350	\$350	\$350	
Voyagers (grades 6-8)	\$350	\$300	\$350	\$350	\$350	\$350	\$350	\$350	\$350	\$350	
Counselor-in-training (grades 9-10) (Send CIT Application & Registration Form)	\$1,050 / 6-week session [July 12-Aug 26] \$200 - \$200 - \$200 - \$200 - \$200 - \$200 - \$200										
<b>Combined Total Weeks</b>											

Sports Sessions	1 June 27- July 1	2 July 5-8 Pro- rate	3 July 11-15	4 July 18-22	5 July 25-29	6 Aug 1-5	7 Aug 8-12	8 Aug 15-19	9 Aug 22-26	10 Aug 29- Sept 2	Total Weeks
Basketball (grades K-3)				\$375							
Baseball (grades K-3)								\$375			
Basketball (grades 3-5)			\$375								
Baseball (grades 3-5)						\$375					
Tennis (Grade 3-5)								\$375			
Basketball (Grades 6-8)		\$350									
Baseball (Grades 6-8)					\$375						

## Deposit Summary

\$75 Annual Membership Fee \$ \_\_\_\_\_`

\_\_\_\_\_ x \$100 Deposit Per Week (applied to camp tuition) \$ \_\_\_\_\_

Y Annual Campaign Donation – Please consider giving the Gift of Camp (*optional*) \$ \_\_\_\_\_

**Total** Amount due at Registration \$ \_\_\_\_\_

Balances will be invoiced, may be paid at the time of registration, and are due on:

6/8/22 for weeks 1-4

6/29/22 for weeks 5-7

7/20/22 for weeks 8-10

\*Auto-draft is available. Balances will be charged on due dates. Request form, if proffered. \*

### STAFF USE ONLY

Forms Completed \_\_\_\_\_

Membership \_\_\_\_\_

Fees Processed \_\_\_\_\_

Auto Draft \_\_\_\_\_

## Parent/Guardian and YMCA Agreement

**Rules for Acceptance and Participation in Camp** - are the same for everyone without regard to race, color, national origin, sex, age, or disability. It is understood that all campers will be treated as individuals and respect will be shown for differences in tastes, preferences, abilities, and range of behavior patterns. The Y reserves the right to dismiss a child from the camp whose special needs we are not able to meet, or whose conduct is not in the best interest of the total camp, without a refund. I have reviewed all policies and am aware of all policies and procedures in the camp parent handbook available on the RVY website

**Refund Policy**—Membership and deposit fees are **non-refundable** and **non-transferable**. It is understood that, in the case of dismissal or voluntary withdrawal, there are **NO refunds** of camp fees after a session has started. If the camper must be dismissed for medical reasons, unused sessions may be refunded. Any requests for cancellations must be completed on a form available at the Y's Welcome Center.

**Additional Fees**—All camp activities, trip fees, and extended care from 7:00 am-6:00 pm are included in your tuition. Each camper must buy at least one t-shirt to wear on camp trips to ensure safety. Buying t-shirts early is encouraged to ensure trips leave on time and the preferred size is available. Late Pick-up Fees of \$15 for up to each fifteen minutes interval will be charged. Calling ahead to inform camp that you may be late helps prepare your child and our camp staff.

**Sunscreen Policy**—All campers must wear SPF of at least 15 on all exposed skin. Parents/guardians are responsible for applying the first layer. Children are to be provided with enough sunscreen for later applications. Staff will be responsible for ensuring follow-up applications after one hour in the water, two hours of sun exposure (due to perspiration). Staff will assist younger campers with applications. An extra t-shirt can be worn during swimming if prone to burning easily.

**Discipline Policy**—I will review and reinforce the camper conduct and other camp policies with my child prior to the start of camp. Discipline at the Y is handled with much care and thought. Redirection and positive reinforcement are used to help children understand proper behavior. Campers not following the conduct policy may be suspended or expelled from camp with no refund.

**Media Policy**—The Y has my permission to use all media taken of my child in a camp in camp activities in Y publicity. (Cross off if not authorized.) I understand that any media images I take during events of other children are not authorized for my own social media postings. Inappropriate comments should be reported to a director.

**Personal Belongings**—All items should be labeled permanently. Your child will transition to many areas and be on busses throughout the day. A Found Box/Area is always available at camp, but items are more likely to be returned if labeled.

**Transportation Permission**—The Y will transport my child to trip locations such as aquatic facilities, trip venues and on walking excursions with appropriate personal and contracted bus companies with advance notice of locations and departure/arrival times.

*I have read all the above information and I am fully aware of all the terms and principles contained herein. All questions have been answered to my satisfaction. I agree that certain activities at the Y have risks that are inherent to the activity. No insurance has been included in membership or program fees. I further agree to indemnify and hold harmless the Y from any claims or demands arising out of any such injuries and losses*



**Parent/Guardian Signature** (Required) \_\_\_\_\_ **Date** \_\_\_\_\_