



# APPLICATION FORM

# YMCA DAY CAMP 2019

### CAMPER INFORMATION

Name:	Birthday (day/month/year):	Age at camp:	
Address:	City:	Postal Code:	Home Phone Number:
Camper's Swim Level: <input type="radio"/> Non-Swimmer <input type="radio"/> Beginner <input type="radio"/> Average <input type="radio"/> Above Average			

### PARENT 1/PRIMARY CONTACT

### PARENT 2/SECONDARY CONTACT

Name:		Name:	
Work Phone:	Cell Phone:	Work Phone:	Cell Phone:
Email:		Email:	

### CUSTODY OF CAMPER

Please Specify:     Mother Only     Father Only     Both     Other:

### WHO IS AUTHORIZED TO PICK UP YOUR CHILD? (LIST ANY POSSIBLE PEOPLE TO PICK UP IN ADDITION TO PARENT 1 & 2)

Name: (other than parent)	Preferred contact number:
Name: (other than parent)	Preferred contact number:

**CAMP PROGRAMS:** Rovers (4-5 years), Trailblazers (6-8 years), Explorers (9-10 years), Mavericks (11-12 years)  
**Fee per week:** Full Week Fees: \$150 Member/\$185 Non-Member Short Week Fees: \$120 Member/\$150 Non-Member

### CAMP SELECTION

SESSION	DATES	CAMP FEE	EXTENDED CARE (\$40 NON-MEMBERS)	TOTAL
Session 1	July 2 - 5, 2019 *			
Session 2	July 8 - 12, 2019			
Session 3	July 15 - 19, 2019			
Session 4	July 22 - 26, 2019			
Session 5	July 29 - August 2, 2019			
Session 6	August 6 - 9, 2019*			
Session 7	August 12 - 16, 2019			
Session 8	August 19 - 23, 2019			
Session 9	August 26-30, 2019			
Session 10**	September 2-6, 2019			
Leadership Session 1	July 8-19, 2019			
Leadership Session 2	August 12-23, 2019			
			YMCA Strong Kids Donation	
			TOTAL	

\* All Camps are CLOSED on Monday, July 1 and Monday, August 5, 2019 - short week fees apply.

\*\* Session 10 Kindergarten Camp for Rover aged campers only

One YMCA Day Camp t-shirt is included in your registration.

**TSHIRT SIZE:**     YS     YM     YL     S     M     L

**All registrations are due by noon on the Thursday prior to the camp session.** Please complete one form per camper. Additional forms can be photocopied. Incomplete forms will result in a delay of your child's camp registration. First come first served, space is limited.



## MEDICAL INFORMATION

Please describe any allergies, medication or medical needs your child's camp staff should know about.

Please list any medications that your child requires while at camp:

Does your child require additional support staff due to additional needs?  Yes  No

If you answered yes to your child requiring additional support staff, please contact our office at 519.419.1267 ext.4514 to ensure availability of support.

**NOTE:** You are also required to complete a supplementary form which can be picked up at our branches or downloaded from [www.ymcawo.ca](http://www.ymcawo.ca)

## PHOTO CONSENT

I understand that photographs, images or recordings containing my child's picture may be used for promotion on the YMCA website; social media, including Facebook and Twitter; and promotional materials such as brochures by the YMCA of Southwestern Ontario. By checking "Yes", I am granting my permission  Yes  No

## PAYMENT / AUTHORIZATION

**YMCA Member**  **Non-member**

(In order to receive the member rate, your camper must be a member of the YMCA of Western Ontario at the time of registration and during camp.)

### PAYMENT OPTIONS:

- Payment in Full (includes \$50 non-refundable deposit per week)
- Extended Payment (minus non-refundable deposit)  
(extended option MUST include a Credit Card or Void Cheque for future payments)

**Notes: NSF payments will be subject to a \$30 service charge**  
**July camps MUST be paid in full by June 1, 2019**  
**August camps MUST be paid in full by July 1, 2019**

### FINANCIAL ASSISTANCE:

- \$15 deposit per week of camp is required.
- Please allow 2-3 weeks for processing of application and calculations.

**FINANCIAL ASSISTANCE OPTIONS:**  YMCA Strong Kids (Must apply In Person)

JUMP START  P2P  City of Windsor

**METHOD OF PAYMENT:**  VISA  MasterCard  Debit  Cash

Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

Signature: \_\_\_\_\_

## CANCELLATION / WITHDRAWAL POLICY

All cancellation requests must be submitted by email directly to Mustafa Shafi at [mustafa.shafi@swo.ymca.ca](mailto:mustafa.shafi@swo.ymca.ca) with subject line "Withdrawal Request" followed by your camper's first and last name. Cancellation requests received prior to 5 business days before start of the affected camp session will receive a refund less the non-refundable deposit. Any refund requests received less than 5 business days prior to the affected camp session or during a camp session will not qualify for a refund. A doctor's note is required for cancellations due to medical reasons. Refunds may take 2 to 3 weeks to process.

**The YMCA reserves the right to cancel any program where registration numbers are not adequate to run an effective program. Families will be notified at the weekly registration close.**

**AUTHORIZATION:** In permitting my child to attend "day camp" programming operated by the YMCA, I the undersigned, in the event of an accident or illness affecting the child indicated on this form, authorize all procedures, including admission to the hospital and necessary treatment herein, as deemed essential for the care and well being of said child. Such action is to be taken only when immediate contact with the undersigned or other indicated authorized contacts cannot be made. I have read and understood:

1. The Cancellation/Withdrawal policy and Payment plans
2. The Drop off/Pick up, Bussing and Extended Care information
3. I agree with the Camper Behaviour expectations and will discuss it with my child
4. I have taken care to explain to YMCA staff any special considerations for my child (ie. language barrier, special needs, special requirements, etc)
5. I authorize my child to participate in all programs

Signature of Parent/Guardian: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**YOUR CHOICE:** From time to time the YMCA of Southwestern Ontario may use my information on this form to notify the applicant of upcoming events, volunteer/donor opportunities and/or offerings from other YMCA of Southwestern Ontario departments that may be beneficial to the applicant.

Check here if you do NOT wish the YMCA of Southwestern Ontario to contact you for any reason other than those relating to this application.