

2019 Super Summer Day Camp Registration Form

(Please fill out **completely**)

Week 1: July 2-5* Week 3: July 15-19 Week 5: July 29- Aug 2 Week 7: Aug. 12-16 CIT Program July 15-26
 Week 2: July 8-12 Week 4: July 22-26 Week 6: Aug. 6-9* Week 8: Aug. 19-23

*Short week fee applies

Camper Information

First Name: _____
Last Name: _____
Camper Birth Date: _____
Age (as of July 1, 2018) _____ Male Female
Legal Custodian: _____

Contact Information

Primary Contact

First Name: _____
Last Name: _____
Birth Date: _____
Relationship to camper: _____
Mailing address: _____
City and Postal Code: _____
Day phone: _____ Evening phone: _____
Alternate phone: _____
Email address: _____

Secondary Contact

First Name: _____
Last Name: _____
Birth Date: _____
Relationship to camper: _____
Day phone: _____ Evening phone: _____
Alternate phone: _____
Alternate Authorized Pick-up/Drop Off Individual(s): _____

Medical Information

Health Card #: _____
Allergies? Yes No
Please describe cause, reaction and treatment:

Does camper carry an EpiPen? Yes No
Asthma? Yes No
Medical Conditions? Yes No

Condition: _____
Condition: _____

Indicate treatment/support needed at camp (if your child requires one-on-one care, please speak with our Camp Director prior to registration):

Medication? Yes No

Does medication need to be administered at camp?
 Yes No

Are your camper's immunizations up to date? Yes No If no, please explain: _____

Additional information or concerns:

Authorization

Upon registering my child for camp at the YMCA, I permit my child to participate in the full range of camp activities, including off-site activities, and authorize the Camp Director and/or his/her appointee in the event of an accident or illness affecting the above camper, to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, as he/she may deem essential for the care and wellbeing of said camper. Such action is to be taken only when immediate contact with the undersigned cannot be made. I understand that photographs and video recordings taken at camp will be used for promotional purposes. I authorize the YMCA camp staff to apply sunscreen and insect repellent if needed to my camper. I understand that I am to provide both of those supplies, labeled with my camper's full name. I have read and understand the payment methods and refund policy. I fully understand the risk involved in my child's participation in YMCA day camp programs and accept full liability. **Refund/cancellation policy:** Min. 1-week notice. A \$15 administration fee will be charged on all cancellations and refunds without a doctor's note.

Signature: _____ Printed Name: _____ Date: _____

Office use only

Parent Package Sent Registration Complete
 Visa Mastercard Cheque Debit

Receipt # _____ Amount: \$ _____
 Cash Member Non-Member

Date: _____, 2018 Staff Full Name: _____

Full week fees: Members \$215 (1st week, 10% discount each additional week), Non-Members \$255
***Short Week Fees** Members \$173 Non-members \$205

Payment Options

Total # of full weeks _____ @ \$ _____/week \$ _____
 Total # of short weeks _____ @ \$ _____/week \$ _____
 Morning/Afternoon Only _____ @ \$ _____/week \$ _____
Minus additional weeks discount for members -\$ _____
(to be calculated by Member Services staff)

TOTAL

Once you have completed the registration package you can either: A) Drop it off at the YMCA downtown at 25-22nd Street East, and make payment with the staff at the Member Services desk, or B) E-mail it to memberservices@ymcasaskatoon.org. After your forms are received by us, you will be sent a confirmation e-mail and you are then required to phone (306-652-7515) with your payment information. **Your child is NOT registered until we have received payment.**



YMCA Strong Kids

The YMCA is one of Canada's oldest and most diverse charities- since our beginning in 1851, the YMCA continues to serve all ages, all backgrounds, and abilities through all stages of life. The YMCA is for everyone. We believe that everyone should be able to participate in programs they need regardless of their ability to pay the full fee. To ensure affordable access, the YMCA offers financial assistance to those who would otherwise be unable to benefit from proven programs and services. Learn more about YMCA Strong Kids at www.ymcastrongkids.ca

Help another child receive a YMCA Day Camp Experience

A gift to the YMCA Strong Kids Campaign would be greatly appreciated.

\$25 \$50 \$75 \$100

Other Amount:
 \$ _____

(A charitable tax receipt will be issued for donations over \$20)