

Summer Camp 2012 Registration Form

Are you registering for the fully integrated program for individuals with disabilities?

Summer 2012 Fee Information

Lower fee listed in boxes on the block chart indicate the cost per session for camps, to be paid in full on or before March 28. Higher fee indicates cost to be paid in full March 28 and after.

1 Camper's Name _____ Grade entering 9/12 _____
(one form per camper please • Please print clearly)

2 At minimum, a Hamilton Area YMCA Program Membership is required and must remain current through the duration of the program.
 ___ \$55 single youth program membership fee. ___ \$100 family program membership fee.

3 Please clearly check or highlight in the appropriate box to indicate the camp you would like to select for your child.
 All camps are based on grade child is entering in September 2012, except where otherwise noted. Please review your selections carefully.

\$45 per day January 16 - March 28 • \$55 per day after March 28

SUMMER FUN - ONE DAY CAMPS ___ 6/20 ___ 6/21 ___ 6/22 ___ 8/27 ___ 8/28 ___ 8/29 ___ pre-camp \$5/day ___ post-camp \$5/day
 check which day(s) you are registering for

S.K.O.R. (Special Needs Camp) - ONE DAY CAMPS ___ 8/27 ___ 8/28 ___ 8/29 ___ pre-camp \$5/day ___ post-camp \$5/day
 check which day(s) you are registering for

Camps	Ages/ Grades	Week 1 6/25 - 6/29	Week 2* 7/2 - 7/6	Week 3 7/9 - 7/13	Week 4 7/16 - 7/20	Week 5 7/23 - 7/27	Week 6 7/30 - 8/3	Week 7 8/6 - 8/10	Week 8 8/13 - 8/17	Week 9 8/20 - 8/24
Traditional Camps										
Mini Explorers	Entering K	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255
Day Camp	Entering 1 - 2	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255
Explorers I	Entering 3 - 4	\$245/\$285	\$196/\$228	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285
Explorers II	Entering 5 - 6	\$245/\$285	\$196/\$228	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285
Teen Explorers	Entering 7 - 8	\$245/\$285	\$196/\$228	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285	\$245/\$285
Specialty Camps										
Arts Galore	Entering 1 - 3	\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255
Wet 'n' Wild	Entering 1 - 3		\$172/\$204		\$215/\$255		\$215/\$255		\$215/\$255	
Games Galore	Entering 1 - 3	\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255
Legos, Lincoln Logs & More	Entering 1 - 5		\$172/\$204		\$215/\$255		\$215/\$255		\$215/\$255	
Super Hero Training	Entering 1 - 5	\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255
Bob Smith Soccer School	Entering 1 - 8					\$260/\$280				\$260/\$280
Dance & Cheer	Entering 1 - 8	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255
Magic Camp	Entering 3 - 8				\$260/\$280		\$260/\$280			\$260/\$280
Splash & Dash	Entering 4 - 8		\$172/\$204		\$215/\$255		\$215/\$255		\$215/\$255	
Great Outdoors & Geocaching	Entering 4 - 8	\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255
Improv Camp	Entering 4 - 8						\$300/\$325			
Try Rugby	Entering 4 - 8									\$260/\$280
Game Shows Galore - NEW!	Entering 4 - 6	\$215/\$255			\$215/\$255			\$215/\$255		
Bugs & Slugs - NEW!	Entering 4 - 6		\$172/\$204			\$215/\$255			\$215/\$255	
Crazy Creations - NEW!	Entering 4 - 6			\$215/\$255			\$215/\$255			\$215/\$255
Boys Will Be Boys	Entering 4 - 6			\$260/\$280			\$260/\$280			
Just us Girls	Entering 4 - 6			\$260/\$280			\$260/\$280			
LIT (Leader In Training)	Entering 7 - 8				\$250/\$270				\$250/\$270	
CIT (Counselor In Training)	Ages 14 - 15		\$300/\$330			\$325/\$355			\$325/\$355	
S.K.O.R. (Special Kids Organized Recreation)	Ages 5 - 21	\$215/\$255	\$172/\$204	\$215/\$255					\$215/\$255	\$215/\$255
Sports Camps										
Soccer Jr.'s	Entering 1 - 3	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255		\$215/\$255	\$215/\$255	\$215/\$255	
Jr. Sports	Entering 1 - 3	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255
Lawn Sports and Volleyball	Entering 3 - 8			\$215/\$255			\$215/\$255			\$215/\$255
Basketball	Entering 4 - 8		\$172/\$204		\$215/\$255		\$215/\$255		\$215/\$255	
Baseball	Entering 4 - 8	\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255		\$215/\$255
Sr. Sports	Entering 4 - 8	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255	\$215/\$255
Soccer Sr.'s	Entering 4 - 8	\$215/\$255	\$172/\$204	\$215/\$255	\$215/\$255		\$215/\$255	\$215/\$255	\$215/\$255	
Flag Football	Entering 4 - 8	\$215/\$255			\$215/\$255					
Olympic Games NEW!	Entering 4 - 8		\$172/\$204			\$215/\$255		\$215/\$255	\$215/\$255	
Mad Science										
Mad Science	See Description				\$260/\$280	\$260/\$280	\$260/\$280	\$290/\$310	\$260/\$280	\$260/\$280
Extreme Travel Camps										
Jr. Travel	Entering 4 - 6	\$305/\$325	\$244/\$260	\$305/\$325	\$305/\$325	\$305/\$325	\$305/\$325	\$305/\$325	\$335/\$355**	\$305/\$325
Tour the Jersey Shore	Entering 4 - 9			\$325/\$345			\$325/\$345			
Extreme Adventure	Entering 6 - 9					\$325/\$345				
Fishin' 'Round Town	Entering 7 - 9				\$305/\$325					
Sr. Travel	Entering 7 - 9	\$305/\$325						\$625/\$645 Overnight		\$305/\$325
Theme Park Week	Entering 7 - 9		\$295/\$315							

*There is no camp on Wednesday, July 4. Week 2 camps will be pro-rated accordingly at time of final payment.

**Overnight at the Sawmill Branch included.

4 How Are You Getting To & From Camp?

This form must be completed for each camper.
 This form includes registration for drop off and pick up at Sawmill, pre and post camp and transportation.

Camper's Name _____

- Campers may have a combination of any a.m. or p.m. bus with a.m. or p.m. camp at Sawmill (ex. 7:30 a.m. bus at Steinert and 4:00 p.m. pick up at Sawmill)
- Campers **MUST** have the same bus stop location for both a.m. and p.m.
- **Transportation fee: \$25.00 per week/per camper**
- A minimum of 15 campers is needed for each bus stop.
- **S.K.O.R. Camp transportation is available at the Steinert bus stop only.**
- June 20 - 22 and August 27 - 29 pre-camp is \$5/day and post-camp is \$5/day.

Please check your selections:

Sawmill Facility			Total Amount
<input type="checkbox"/> 7:30 a.m. Pre-camp	\$20.00 pre camp fee per week	x # of weeks _____ =	_____
<input type="checkbox"/> 8:45 a.m. Parent drop off	no additional charge		\$0
<input type="checkbox"/> 4:00 p.m. Parent pick up	no additional charge		\$0
<input type="checkbox"/> 6:00 p.m. Post camp	\$25.00 post camp fee per week	x # of weeks _____ =	_____
TOTAL FOR SAWMILL			_____

AMC Movie Theatre (Sloan Avenue)			Total Amount
<input type="checkbox"/> 7:30 a.m. Bus	\$20.00 pre camp fee per week*	x # of weeks _____ =	_____
<input type="checkbox"/> 8:30 a.m. Bus	no additional charge*		\$0
<input type="checkbox"/> 4:40 p.m. Bus	no additional charge*		\$0
<input type="checkbox"/> 5:40 p.m. Bus	\$25.00 post camp fee per week*	x # of weeks _____ =	_____
Transportation	*\$25.00 transportation fee per week	x # of weeks _____ =	_____
TOTAL FOR AMC			_____

Steinert High School (Klockner Road, bus entrance)			Total Amount
<input type="checkbox"/> 7:30 a.m. Bus	\$20.00 pre camp fee per week*	x # of weeks _____ =	_____
<input type="checkbox"/> 8:30 a.m. Bus	no additional charge*		\$0
<input type="checkbox"/> 4:15 p.m. Bus	no additional charge*		\$0
<input type="checkbox"/> 5:15 p.m. Bus	\$25.00 post camp fee per week*	x # of weeks _____ =	_____
Transportation	*\$25.00 transportation fee per week	x # of weeks _____ =	_____
TOTAL FOR STEINERT			_____

GRAND TOTAL FOR ALL SITES _____

5

Payment Method: Check # _____ Deposit Only \$ _____ Full Payment \$ _____

Credit Card # _____ SID # _____ Exp. Date _____

Card Holder's Name (print) _____ Signature _____

Don't forget to complete numbers 6 & 7 on reverse side.

6 Emergency Contacts, Pick Up Authorizations & Parent Acknowledgement

Camper's Name _____

Please list all persons authorized to pick up your child. Parents or guardian names must be included on this list. You will be given pick up cards (identified by pick up location) to distribute to everyone on this list, which must be presented when picking up your child. In emergency situations only, parent/guardian must give written permission for an individual, who is not on this list, to pick up the child listed on this application. No child will be released without a pick up card or emergency verbal/written permission. NO exceptions will be made to this policy. This is done for the safety of your child. Please make sure that the individuals on this list are aware that they may be called in an emergency to pick up your child. You are welcome to add or delete from this list at any time, however you will be responsible for retrieving any invalid cards. Please indicate if a non-custodial parent has limits on visitation or pick up. If a non-custodial parent has been denied visitation or has limited visitation by court order, a copy of the order must be given to the YMCA and kept on file at the program.

1. Name _____ Relationship _____
 Address _____ Home Phone _____
 Cell Phone _____ Work Phone _____

2. Name _____ Relationship _____
 Address _____ Home Phone _____
 Cell Phone _____ Work Phone _____

3. Name _____ Relationship _____
 Address _____ Home Phone _____
 Cell Phone _____ Work Phone _____

4. Name _____ Relationship _____
 Address _____ Home Phone _____
 Cell Phone _____ Work Phone _____

In the event of an emergency, parents will be contacted. If parents are not available, the other individuals on the emergency contact/pick-up list will be contacted.

The following individuals are **NOT ALLOWED** to pick up my child:

1. Name _____ Relationship _____
 2. Name _____ Relationship _____

Parent Acknowledgement

I hereby enroll my child, _____, in the Hamilton Area YMCA Sawmill Branch Summer Camps and I:

1. Grant permission for the child to fully participate in all scheduled activities, including bus transportation (if applicable), swimming and field trips (if applicable), unless otherwise stated in writing to the Hamilton Area YMCA Sawmill Branch. Any conditions which might affect this child's performance at camp, or any conditions of which the staff should be aware (medical treatment, allergies, asthma, special requirements), are listed on the medical history part of the registration form.
2. Understand that at minimum a Hamilton Area YMCA Program Membership is required and must remain current through the duration of the program.
3. Understand I must complete the registration form, including the medical history and immunization information, in full, one form per child.
4. Understand I must leave at least a \$25.00 non-refundable, non-transferable deposit for each child, for each week registered.
5. Understand the Hamilton Area YMCA Sawmill Branch will refund payment, less the \$25.00 deposit, if cancellation is made prior to May 18, 2012. Refunds will not be given after May 18, 2012.
6. **Understand that camp registration closes and will not be accepted after 8:30 p.m. on Wednesday prior to camp start date.**
7. **Understand the first camp change is free, all subsequent changes are assessed a \$25.00 fee each time.**
8. Agree to pay the balance of camp fees in full. All payments must be paid in full by the date stated to receive the appropriate rate. If payment is not received on or before March 28, all payments are due as follows: Payment for weeks 1, 2 and 3 are due **May 16**; payment for weeks 4, 5, and 6 are due **June 13**; payment for weeks 7, 8 and 9 are due **July 11**. **Camp balances may be paid online.**
9. Understand I must supervise my child until he or she is checked in with the counselors. I must also sign my child in and out with the proper staff and identification at drop off and pick up.
10. Give permission to use any pictures or film taken of my child during participation at camp for Hamilton Area YMCA promotional purposes as deemed appropriate.
11. Understand each camper and parent must cooperate and accept camp rules and guidelines. Inappropriate behavior may involve disciplinary action by the camp directors and/or dismissal from camp. If a camper is dismissed for inappropriate behavior camp fees are non-refundable.
12. Understand siblings who attend summer camp will receive a \$10 discount per child, per camp, excluding: Bob Smith Soccer Camp, Boys Will Be Boys, Just Us Girls, Mad Science, Magic Camp, Try Rugby, One Day Camps, all Extreme Travel Camps. CIT, LIT and Improv Camp will receive a \$10.00 discount per two week session.
13. Understand Financial Assistance is available for camp where funds are available. Not all camps are eligible for assistance. Applications are accepted through May 1.
14. Have read and understand these policies and procedures in addition to those explained in the parent handbook, found on our website hamiltonymca.org.

Parent or Guardian Signature _____ Date _____

7 Hamilton Area YMCA Sawmill Branch 2012 Summer Camp Registration Form

Please Print _____

Camper's Name _____ M _____ F _____ Grade entering in 9/12 _____
 Address _____ City _____ State _____ Zip _____
 Home Phone _____ Age _____ DOB _____
 Parent Name _____ Employer _____
 Work Phone _____ Cell Phone _____
 Parent Name _____ Employer _____
 Work Phone _____ Cell Phone _____
 Parent E-mail _____

Medical History (Required by the New Jersey Department of Health & Safety)

Doctor Preference _____ Phone _____

Immunization History: Please record the date (month & year) of the basic immunizations and the most recent booster. If you have questions, check with your doctor. **Physician's signature is NOT required. Dates REQUIRED and must be written on this form.**

DPT Booster _____	Tetanus Booster _____	Polio OPV (sabin) _____
MMR _____	Pertussis _____	HBV _____
HIB _____	Varicella _____	Tuberculin Test _____ Result _____

Date of last medical examination _____

Health History: (provide approximate date of onset or instance; if applicable)

<u>Allergies</u>	<u>Conditions</u>
Hay Fever _____	Ear Infections _____
Ivy Poisoning _____	Heart Defect/Disease _____
Insect Stings _____	Convulsions _____
Penicillin _____	Diabetes _____
Drugs _____	Bleeding Disorders _____
	Asthma/Reactive Airway _____

Food Allergies: _____

Medication Allergies: _____

Does your child carry an asthma inhaler? _____ Will you be sending an Epipen to camp? _____

Operations or serious injuries (dates): _____

Chronic or recurring illness including seizures: _____

List all medications that your child is currently taking: _____

Please list any additional health history information we should be aware of: _____

IMPORTANT: PLEASE NOTIFY THE CAMP IF THIS CHILD HAS BEEN EXPOSED TO ANY COMMUNICABLE DISEASE

Parents Authorization: This health history is correct as far as I know, and the person herein described has permission to engage in all prescribed activities except as noted by me. The person herein has had a physical examination by his/her doctor within the last year, is up to date with immunizations and is in good health to participate in Hamilton Area YMCA Sawmill Branch programs. I hereby give permission to the physician selected by the Camp Director to order X-rays, routine tests and treatment for the health of my child in the event of an emergency. I hereby give permission to the physician selected by the Camp Director to emergency transport, hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for my child as named above in the event of an emergency if I cannot be reached.

Parent or Guardian Signature _____ Date _____

How did you hear about us? _____ Previous Camper _____ Direct Mail/Brochure _____ Website _____ Friend _____ School _____ Ad, which paper? _____ Other _____