



CAMP JEWELL YMCA

2016 Day Camp Registration Form

YOUR CAMPER'S INFORMATION HERE ↓

1 Camper Information: Male Female

Last Name: _____ First Name: _____

Date of Birth: ___/___/___ Grade Entering Fall '16: _____ School: _____

Camper Lives with: _____

T-shirt size: Youth Adult Size: _____ How many years has camper attended Camp Jewell? _____

How did you hear about Camp Jewell? Please check one and use the line below to write the name/place if applicable.

Friend, who? Alumni, who? Internet, where? Camp Fair, where? Magazine, which? School, which? Brochure TV Other

Referred by: _____

YOUR INFORMATION HERE ↓

2 Primary/Parent/ Guardian #1 Information: (All information, correspondence and invoices will be sent to this name)

Relationship to Camper: Mother Father Other: _____ Mr. Mrs. Ms. Dr.

Last Name: _____ First Name: _____ Occupation: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Date of Birth: ___/___/___ Jewell Alumni? Yes No

Street Address: _____ City: _____ State: _____

Zip/Postal Code: _____ Country (if outside USA): _____

3 Parent/ Guardian #2 Information

Relationship to Camper: Mother Father Other: _____ Mr. Mrs. Ms. Dr.

Last Name: _____ First Name: _____ Occupation: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Date of Birth: ___/___/___ Jewell Alumni? Yes No

Street Address: _____ City: _____ State: _____

Zip/Postal Code: _____ Country (if outside USA): _____

4 Emergency Contacts & Authorized Pick up Persons: (In addition to parents/ guardians)

*Use this area to list the individual(s) we may contact in an emergency and that you authorize to pick up your camper from camp if you are unable to do so.

1. Name: _____ 2. Name: _____

Relationship to Camper: _____ Relationship to Camper: _____

Home Phone: _____ Home Phone: _____

Cell/Work Phone: _____ Cell/Work Phone: _____

5 Camper's Commitment

I want to become a camper at Camp Jewell YMCA. If accepted I agree to abide by the camp's code of conduct and camp rules. I will do my best to make this a good experience for myself and my fellow campers. I understand that failure to live up to this promise might result in my dismissal from camp (I understand I am not eligible for any refund).

Camper's Signature: _____ Date: _____

6 Parent/Guardian Agreement

I approve this application, and certify that the proposed camper is capable of such an experience. I agree to have a health form signed by a physician or his designee that includes current medication orders and physical exam. This exam must have been given within 24 months of the camper's arrival date. The deposit of \$50 per session is for the purpose of securing a spot and as such is neither refundable nor transferable. I also agree to pay the balance in full by May 1st. If registering after May 1st, payment is due in full upon registration. Cancellations after May 1st are not eligible for any refund. Only in case of illness, not homesickness, will any refund be made and then only on a pro-rated basis. I understand that Camp Jewell is not responsible for lost or stolen property.

I authorize the Camp Director and Camp Nurse to seek emergency medical attention for my child in the case of accident or illness if I cannot be reached by phone. I authorize the YMCA to have and use the name, photographs, slides, and video tape of the person named on this application in camp promotional materials. I understand that cabin mate requests are only granted if both campers of similar age request each other.

Parent/Guardian Signature Required: _____ Date: _____

Camper Name (First and last): _____

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✓ Check box(es) of session(s) you would like to attend

CAMP SESSIONS	TIER 1	TIER 2	TIER 3	FINANCIAL ASSISTANCE	PRE CAMP	POST CAMP	HORSEMANSHIP
SESSION A-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION B-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION C-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION D-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION E-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION F-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION G-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125
SESSION H-	<input type="checkbox"/> \$239	<input type="checkbox"/> \$224	<input type="checkbox"/> \$209	<input type="checkbox"/>	<input type="checkbox"/> \$15	<input type="checkbox"/> \$15	<input type="checkbox"/> \$125

Why 4 Tiered Tuition fees?

Realizing that families have differing abilities to pay, Camp Jewell YMCA has instituted a voluntary 4-tier pricing program for our Summer DAY CAMP. to accomodate all financial needs. Please choose the tier that is most suitable for your family. All children have the same experience no matter which tier a family is able to pay. The tier selected by a family will be kept confidential.

Tier 1-Most accurately accounts for the true cost of operating camp including food, staff salaries, supplies, wear and tear on equipment, and depreciation. Please pay this cost if you are able.

Tier 2-A partially subsidized rate for those who cannot afford to pay the full costs associated with attending camp.

Tier 3-A subsidized rate that only covers the basic costs associated with attending camp including, food, staff salaries and supplies.

Tier 4-A variable rate made possible by donations to the Annual Campaign, for families who have need for financial assistance. To apply, please request an application form from Camp Jewell YMCA.



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PROJECT 350 ANNUAL CAMPAIGN FOR CAMBERSHIP

Camp Jewell is a 501(c)3 charitable organization. 100% of your tax deductible contribution goes directly to support our Annual Campaign for Camperships, which offers opportunities for all children to attend camp regardless of their ability to pay. Will you consider lending your support with a gift?

Yes! I/we would like to help send 350 children to camp.

Gift Amount: \$500 \$350 \$100 Other:\$_____

Thank you!

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USE THIS TO CALCULATE YOUR FEES

Total price of day camp session(s)	
Optional Pre Camp Fees (\$15/session)	
Optional Post Camp Fees (\$15/session)	
Optional Campership Gift	
Optional Horsemanship Lessons (5 Lessons/ \$125)	
SUBTOTAL	
Less deposit (\$50/session+ Campership Gift)	
BALANCE DUE	
MAY 1st 2016	

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PAYMENT INFORMATION

Payment Method: Check Enclosed Credit Card

Please charge \$_____ on my credit card

MC VISA AMEX DISCOVER

Card # _____

Exp. Date:_____/_____/_____ Security Code:_____

➔ Authorized Signature:_____

Cardholder's name (please print)_____

Please schedule my May 1st balance due payment to the credit card listed above

Please contact me about a payment plan

Make Checks Payable to: Camp Jewell YMCA