

YMCA CAMP GLACIER HOLLOW 2023 Overnight Camp Registration Ages 7-14



Address Street City Street City Street City Street City Street City Parent Email Are there any medical, custodial, physical, behavioral conditions or special needs that we should be aware of now? Average	STEVENS POINT AREA YMCA	Ages / 11			Z.
Grade Next Year	Participant Name	Birth Date	Age at Camp	Gender	
Are there any medical, custodial, physical, behavioral conditions or special needs that we should be aware of now?	Address				
Are there any medical, custodial, physical, behavioral conditions or special needs that we should be aware of now? Are very autended an overnight camp before?			. =		
Have you attended an overnight camp before? Parent Name	Grade Next Year Parent Email	Par	ent Email	2	
Parent Name	are there any medical, custodial, physical, behavioral condi-	Lions of special fleeds that w	e silould be aware of ilo		
Parent Name).
Registration Information 1. Complete both sides and return this form along with a \$100 non-refundable, non-transferable deposit or full payment for each session. If program is full, your posit will be returned and you will be placed on a waiting list. Balance is due at least (6) four weeks prior to each camp session. An unpaid balance may result in forfeiture of your reserved spot. Invoices will not be mailed. A syour camp session gets closer, you will receive an enall with specific details about your camp session. A your child's completed health history profile and immunization information MUST be submitted with this registration form. The registration process will not be until all completed forms are received. Parents are responsible for any enalty and suffering including emergency contact and authorized pick up information. We will return all test except your deposit if written cancellation is made four weeks prior to session. After four weeks, refunds may not be available. Dane 4-7. Beginning Explorer (Ages 7-10) Price A: \$410 Price B: \$350 Price C: \$425 Dane 4-7. Price B: \$495 Price B: \$495 Price C: \$425 Dane 4-7. Beginning Explorer (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$540 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$540 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$540 Price B: \$495 Price C: \$425 Dane 5-30 Splash & Sport (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Dane 5-40 Splash & Sport (Ag	Would you like to request to be in a cabin with a friend? Wh	0?			
Registration Information Complete both sides and return this form along with a \$100 non-refundable, non-transferable deposit or full payment for each session. If program is full, your post will be returned and you will be placed on a waiting list. Balance is due at least (4) four weeks prior to each camp session. An unpaid balance may result in forfeiture of your reserved spot, invoices will not be mailed. 2. As your camp session gets closer, you will receive an email with specific details about your camp session. Some prior is completed health intory profile and immunization information MUST be submitted with this registration form. The registration process will not be until all completed forms are received. Parents are responsible for any changes to the profile including emergency contact and authorized pick up information. We will return all fees except your deposit if written cancellation is made four weeks prior to session. After four weeks, refor to session. After four weeks, refor to session. After four weeks prior to session. After four weeks prior to session. After four weeks, reform to session. After four weeks prior to session. After four w	Parent Name	Parent Name			
Registration Information Complete both sides and return this form along with a \$100 non-refundable, non-transferable deposit or full payment for each session. If program is full, your posit will be returned and you will be placed on a waiting list. Balance is due at least (4) four weeks prior to each camp session. An unpaid balance may result in forfeiture of your reserved spot, invoices will not be mailed. 2. As your camp session gets closer, you will receive an email with specific details about your camp session. 3. Your child's completed forms are received. Parents are responsible for any changes to the profile including emergency contact and authorized pick up information. 4. We will return all fees except your depost if written cancellation is made four weeks prior to session. After four weeks, reform this registration form. The registration process will not be until all completed forms are received. Parents are responsible for any changes to the profile including emergency contact and authorized pick up information. 4. We will return all fees except your depost if written cancellation is made four weeks prior to session. After four weeks, refor to session. After four weeks, refor to session. After four weeks, reform the interval in the profile including emergency contact and authorized pick up information. WIST be submitted with this registration form. The registration form. The registration form. The registration form with the profile including emergency contact and authorized pick up information MUST be submitted with this registration form. The registration form. The registration form with the profile including emergency contact and authorized pick up information MUST be submitted with this registration form. The registration form with the profile and the profile including emergency contact and authorized pick up information MUST be submitted with this registration form. The registration form. The registration form and the profile and the profile and the profile and the profile including emergency co	H # Secondary #	H#	Secon	dary #	
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Price A: \$410 Price B: \$360 Price C: \$280 Aug. 6-11 Camp Wise Spirits—GIRLS ONLY (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Aug 13-18 Camp Strong Spirits—BOYS ONLY (Ages 8-14) Price A: \$545 Price B: \$495 Price C: \$425 Participant is SPYMCA Family or Single Parent Family Member Tier Price: A B or C \$ Y Member Discount (-\$25): \$ \$100 Dep. Required. Total Paid Now: \$ Check Enclosed Charge My Card: \$ Recruit A Friend Trading Post Credit (See page 2 for information)	Price A: \$545 Price B: \$495 Price C: \$42 June 18–23 Twilight Tamers (Ages 8–14)	experience to ever abilities to pay. Of accommodate all you can afford, all continue improving subsidized by the contributions, received to the email addressed of the email addressed	eryone, we understand to bur tiered pricing allows ifinancial situations. Plus illowing Camp Glacier Hong the quality of our care YMCA through fundrai quiring that you completess provided above. If historically subsidized the true cost of camp. Coartially subsidized rate of the provided above is accurately reflects the grin no way influences to ly feel it is important to llow, to give families the	hat different famili us to ease consider select of the sel	eting the highest tied funding to ce B and Price C are s, and ey that will be sent oot eflects the actual A Camp Glacier or child (ren) will
Price A: \$545 Price B: \$495 Price C: \$425 Aug 13–18 Camp Strong Spirits—BOYS ONLY (Ages 8–14) Price A: \$545 Price B: \$495 Price C: \$425 Participant is SPYMCA Family or Single Parent Family Member Fier Price: A B or C \$ Y Member Discount (-\$25): \$ \$100 Dep. Required. Total Paid Now: \$ Check Enclosed	Price A: \$410 Price B: \$ 360 Price C: \$280	Financial Assist		l available. Pleas	e request a Camp
Aug 13–18 Camp Strong Spirits—BOYS ONLY (Ages 8–14) Price A: \$545 Price B: \$495 Price C: \$425 Participant is SPYMCA Family or Single Parent Family Member Tier Price: A B or C \$ Y Member Discount (-\$25): \$ \$100 Dep. Required. Total Paid Now: \$ Check Enclosed Card #: Charge My Card: Card #: (See page 2 for information)					
Tier Price: A B or C \$ Y Member Discount (-\$25): \$ \$100 Dep. Required. Total Paid Now: \$ Check Enclosed	Price A: \$545 Price B: \$495 Price C: \$425	-14)	\$25 Member Discount per	overnight camp sessi	on.
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Card #: (See page 2 for information)	Fier Price: A B or C \$ Y Member Disco	ount (-\$25): \$	\$100 Dep. Required. 1		
	☐ Check Enclosed ☐ Charge My Card: \$_		☐ Recruit A Friend	Trading Post Credi	
					m.



Participant Name - Please Print

RECRUIT A FRIEND TRADING POST CREDIT

Recruit a friend (non-sibling) who has not attended one of our Camps before and you will receive a \$25 Trading Post

SHOLLOW STEVENS POINT AREA YMCA	Trill more than one triend and det additional credits. I redits are not redeemable for cash			
	□ I recruited:			
	□ I was recruited by:			
•				
participants in high regard. Howe injury when choosing to participa with such things as, but not limite equipment failure do exist. In this	warning of RISK committed to conducting its summer camping and tripping programs in a safe manner and holds the safety of ever, participants and parents of children registering for any program must recognize that there are inherent risks of sickness and/or te in these recreational activities. Understandably, not all hazards and dangers can be foreseen. Certain risks and dangers associated ed to, acts of God, inclement weather, slipping, falling, insect bites, and s regard, it must be recognized that it is impossible for the YMCA to guarantee absolute safety. The Stevens Point Area YMCA does, how- such risks through careful and proper preparation and insists that all participants followsafety rules and instructions that are designed of.			
	rermining if you or your children are physically fit for the activities in these programs. It is always advisable, Babled in any way, or have recently suffered an illness, injury or impairment, to consult a physician before Bal program.			
	PARENT/GUARDIAN CONSENT and WAIVER & RELEASE OF LIABILITY			
ment and programs. I am aware of participation in Resident Camp, Lits directors, employees, volunteer, to me, my child and his/her proing but not limited to transportati	ASE FROM LIABILITY: I understand that all reasonable safety precautions are taken by the YMCA in the operation of its facility, equipof and accept all the risks inherent in the program. I agree that my or my child's voluntary eadership Programs, and/or Adventure Trips shall be undertaken at my or his/her sole risk, and that the YMCA and Camp Glacier Hollow, ers and agents shall not be liable for any claims, injuries, damages, losses, diseases, wrongful death, actions or cause of action whatsoevoperty, arising out of or connected to participation in Resident Camp, Teen Leadership Programs, and/or Outdoor Adventure Trips includion services, camping, canoeing/kayaking, rafting, hiking, swimming, biking, rock climbing, fishing, horseback riding/grooming, and other armless and indemnify the YMCA and Camp Glacier Hollow, its directors, employees, volunteers and agents, from any and all liabilities pation in this program.			
or secure emergency services for granting permission for me or my	RGENCY TREATMENT AUTHORIZATION: In the event that I cannot be reached in an emergency, I authorize the YMCA staff to transport to me or my child, and I give my consent for the YMCA staff to act on my behalf in child to receive any emergency treatment deemed necessary including, hospitalization, injection, anesthesia or surgery. I agree that I nt of any and all medical services rendered.			
	TOGRAPHIC/MEDIA RELEASE: I give permission for my child or I to appear in media coverage approved by the YMCA and for the YMCA to y child or I for promotional purposes and social media.			
	TRIP & TRANSPORTATION PERMISSION: I give permission for my child to participate in walking, bus and YMCA Van field trips. I give isported for field trips or any regularly scheduled vehicle transportation.			
that reasonable accommodations would not allow for the safety and to special needs or behavior, I or	SONABLE ACCOMMODATIONS & BEHAVIOR CLAUSE: Participants/children with special needs or challenges will be accepted provided can be made for their participation in the program and/or their participation does not require an inordinate amount of staff time that d welfare of the other participants/children in the program. I understand that if my child or I require one-on-one attention, whether due my child may be denied or removed from the program. Participants are expected to follow guidelines and instructions from staff and act and respectful manner. Failure to follow guidelines may result in dismissal from camp without refund.			
(as directed) in the event of minor	DICATION/SUNSCREEN/REPELLENT: I give permission to the Camp Health Staff to give my child or I over-the-counter camp medications pain/ailment (i.e. headache, stomach ache, body aches, insect bites, sun protection, etc) I give permission for my child or I to use suneceive assistance as needed from Counselors, unless otherwise noted on my child's or my Health History form.			
camp fee on or before the paymer	TICIPANT ENROLLMENT ACCEPTANCE: I hereby apply for a reservation for my child as a program participant. I agree to pay the total not due date. I understand that failure to pay by the due date may forfeit my application and deposit. Furthermore, if my child or I are so illness, injury, or inappropriate behavior, a refund may not be available.			
my responsibility to provide any c	CURATE/COMPLETE INFORMATION: I hereby state that the information I have provided is accurate and complete. I understand that it is changes/updates regarding emergency and health information to the YMCA. I further eaccurate, complete, and updated information may jeopardize my child's or my registration and/or participation in this program.			
	d fully understand the above warning of risk and parent/guardian consent and waiver & release sections. I fully understand that by parent/guardian consent on all sections contained within.			

Date

Parent/Guardian Signature