



WINTER BREAK DAY CAMP

DECEMBER 26 - 28, 2018

Ages 4 - 12

Are you looking for something fun for your kids to do during winter break? Send them to Camp Y-Koda to enjoy the brisk winter air and great outdoor activities. We will spend the days sledding, snowshoeing, building forts and keeping warm around campfires. Please provide a bag lunch and snack each day. Camp will provide milk. Please bring adequate clothing to spend a lot of time outdoors. **The registration deadline is December 19, 2018.**

- **There is no bussing for this camp. Children must be dropped off and picked up at Camp Y-Koda daily.**
- **Extended care at Camp Y-Koda is from 7:30am - 8:30am and 4:00pm - 5:30pm for additional fee of \$5.00 per day.**



Wednesday - Friday 8:30am - 4:00pm



CAMP Y-KODA 2018 WINTER BREAK DAY CAMP

Please return to the Sheboygan YMCA, Sheboygan Falls YMCA or Camp Y-Koda

Name _____ Birth Date _____ Grade _____ M F
 Address _____ City _____
 State _____ Zip Code _____ Phone 1 _____ Phone 2 _____
 Email _____ Parent/Guardian _____
Emergency Contact _____ **Phone #** _____
Secondary Contact _____ **Phone #** _____

Hold Harmless Agreement

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for myself and/or my child to participate and be photographed in YMCA activities.

Parent Signature _____ **Date** _____

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|--|--|--|
| <input checked="" type="checkbox"/> Date 18F2-4CCAMP... | <input checked="" type="checkbox"/> Fee per Day | <input checked="" type="checkbox"/> Extended Care at Camp |
| <input type="checkbox"/> December 26 | <input type="checkbox"/> \$35.00 YMCA Member | <input type="checkbox"/> \$5.00 per Day - 12/26 |
| <input type="checkbox"/> December 27 | <input type="checkbox"/> \$45.00 Participant | <input type="checkbox"/> \$5.00 per Day - 12/27 |
| <input type="checkbox"/> December 28 | | <input type="checkbox"/> \$5.00 per Day - 12/28 |

Health Concerns _____

Behavior Issues _____

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____ **RETURN FORM TO CAMP**