

CAMP Y-KODA 2019 WINTER - SPRING PROGRAMS
Please return to the Sheboygan YMCA, Sheboygan Falls YMCA or Camp Y-Koda

Participant Name _____ Birth Date _____ Grade _____ M F
 Address _____ City _____ State _____ Zip _____
 Phone 1 _____ Phone 2 _____ **Email Required** _____
Emergency Contact _____ Phone # _____

Family Members (for certain events) - Each person must be registered

Name _____ Birth Date _____ Name _____ Birth Date _____
 Name _____ Birth Date _____ Name _____ Birth Date _____

- If your child has medication to be administered during the event, it must be turned in to a staff member upon arrival. The medication must be in the original container along with a note indicating dosage and permission to administer.
- If your child will be picked up prior to the scheduled pick up time, you must turn in a note to a staff member upon arrival. You must sign your child in at drop off and show photo ID and sign out at pick up.

Special Needs/Accomodations _____

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/Participant Signature _____ **Date** _____

GIRL'S RETREAT 19W1-4CGIRLSRET

Fee is per Person

- \$35.00 YMCA Member
 \$45.00 Participant

SNOWSHOE HIKES 19W1-4CSNOWSHOE

Fee is per Person/per Day

- January 19 \$8.00 YMCA Member
 February 18 \$12.00 Participant

WINTER SLEEPOVER 19W1-4CSLEEPOVER

- \$42.00 YMCA Member
 \$52.00 Participant

FATHER-DAUGHTER DANCE 19W1-4CFATHER

Fee is per Person

- \$20.00 YMCA Member
 \$25.00 Participant

VALENTINE'S DAY PARTY 19W1-4CVALENTINE

Fee is per Person

- \$15.00 YMCA Member
 \$25.00 Participant

KNEE HIGH NATURALISTS 4CKNEEHIGH

Fee is per Child, per Day

- 1/16 19W1 \$6.00 per Child
 2/13 19W1 \$4.00 Add'l Sibling
 3/13 19W2

HOME SCHOOL PROGRAMS 4CHOMESCH..

Fee is per Child, per Day

- 1/16 19W1 \$8.00 per Child
 2/20 19W1
 3/20 19W2

SPRING BREAK CAMP 19W2-4CCAMP

Day

- Mon.... 3/25
 Tues ... 3/26
 Wed ... 3/27
 Thur ... 3/28
 Fri..... 3/29

Bussing (no charge)

- Sheboygan YMCA
 Sheboygan Falls YMCA

Extended Care + \$5 Day

- Sheboygan YMCA
 Sheboygan Falls YMCA

# of Days	1	2	3	4	5
Member	\$42	\$75	\$99	\$114	\$135
Participant	\$52	\$85	\$114	\$139	\$160

PAYMENT

- Cash
 Check # _____ Please note: checks must be made payable to the YMCA.
 Credit Card # _____ Exp Date _____ 3 Digit Code _____

Total Amount Due \$ _____ **Receipt #** _____ **Rec'd By** _____ **RETURN TO CAMP**