

YMCA CAMP Y-KODA

W3340 Sunset Road, Sheboygan Falls, WI 53085
P 920-467-6882 • F 920-467-7240
www.sheboygancountyyymca.org/camp-y-koda



GUIDED SHEBOYGAN RIVER KAYAK TRIP
WEDNESDAY, MAY 12 AND/OR MAY 26, 2021

Age 10 & Older and Adults

Join Camp Y-Koda for an adventurous kayaking experience! After a brief review of kayaking, embark on a 6-mile journey down the Sheboygan River beginning at Camp Y-Koda and ending at the Sheboygan Falls YMCA.

Experience is required on this fun trip down the river. This trip is great for friends, families, scout troops or anyone looking for an outdoor adventure! Participating children must be at least 10 years old with an adult.

Camp provides a lifeguard-certified guide, kayaks, paddles, life jackets and transportation back to camp after the trip. For more information, please contact Heather Nitsch at 920-467-6882 or hnitsch@sheboygancountyyymca.org.

Wednesday 3:30pm - 6:00pm



YMCA CAMP Y-KODA 2021 SPRING GUIDED SHEBOYGAN RIVER KAYAK TRIP

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

Name _____ Birth Date _____ M F

Address _____ City _____ State _____ Zip _____

Email Required _____ Phone 1 _____ Phone 2 _____

Emergency Contact _____ **Phone #** _____

FAMILY MEMBERS - each person must be registered

Name _____ Birth Date _____ M F

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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.

Adult or Parent Signature _____ **Date** _____

- Date**
- May 12
- May 26

- Fee per Date**
- \$20.00 per Person

Click on button to email form.
YMCA Camp Y-Koda will contact you for payment.

Receipt # _____ Amt Paid _____ Rec'd By _____ Date _____ **RETURN FORM TO CAMP**
21S1-4CKAYAK..