



CAMP WOODSTOCK YMCA 1-800-782-2344

42 Camp Road, Woodstock Valley, CT 06282

Please circle your chosen tier

| | | Tier 1 | Tier 2 | Tier 3 |
|---------------------------------------|------------|---------|---------|---------|
| Summer Camp (2 weeks) | ages 7-14 | \$1,470 | \$1,370 | \$1,270 |
| Summer Camp (1 week) | ages 7-14 | \$875 | \$825 | \$775 |
| Teen Adventure Trips (1 week) | ages 14-16 | \$1,025 | \$925 | \$825 |
| Leaders in Training (4 weeks) | age 15 | \$1,975 | \$1,875 | \$1,775 |
| Four Week Price (2 Two-week Sessions) | | \$2,895 | \$2,695 | \$2,495 |

CAMP WOODSTOCK YMCA

A Branch of the YMCA of Greater Hartford

2012 REGISTRATION FORM

\$200 non-refundable/non-transferable deposit for each session per child.

The YMCA strives to serve all people regardless of ability to pay. Financial assistance information is available at our office. 1 (800) 782-2344

All programs are open to everyone, without regard to race, gender, color, religion, or national origin.

CAMPER INFORMATION

Please Print

Camper's Last Name _____

Camper's Address _____

Camper's First Name _____

City _____ State _____ Zip _____

Date of Birth ____/____/____ Gender _____ Grade _____

With whom does the camper live? _____

School _____

Email Address _____

How did you hear about Camp Woodstock? _____

This will be my ____ year at Camp Woodstock.

Mother's Last Name _____

Father's Last Name _____

Mother's First Name _____

Father's First Name _____

Mother's Date of Birth ____/____/____

Father's Date of Birth ____/____/____

Home Phone _____

Home Phone _____

Work Phone _____

Work Phone _____

Cell Phone/Pager _____

Cell Phone/Pager _____

Email Address _____

Email Address _____

Camp Woodstock Alumni Yes No Occupation _____

Camp Woodstock Alumni Yes No Occupation _____

Additional Emergency Contact

Full Name _____

Home Phone _____

Relationship _____

Work Phone _____

PLEASE CHECK SESSION(S) DESIRED:

TWO WEEK SESSIONS

- Session 1 June 24 - July 7
- Session 2 July 8 - July 21
- Session 3 July 22 - Aug 4
- Session 4 Aug 5 - Aug 18

ONE WEEK SESSIONS

- Session 1A June 24 - June 30
- Session 1B July 1 - July 7
- Session 3A July 22 - July 28
- Session 3B July 29 - Aug 4
- Session 4A Aug 5 - Aug 11
- Session 4B Aug 12 - Aug 18

LEADERS IN TRAINING (LIT)

- Session 1 June 24 - July 21
- Session 2 July 22 - Aug 18
- I will be staying at camp between sessions (\$65)

TEEN ADVENTURE TRIPS

- T1 Maine Exploration
- T2 Adirondack Adventure
- T3 White Mountain Madness
- T4 Cape Cod/Martha's Vineyard Bike/Beach
- T5 Cape Cod/Martha's Vineyard Bike/Beach
- T6 New England Adventure

- June 24 - June 30
- July 8 - July 14
- July 15 - July 21
- July 22 - July 28
- Aug 5 - Aug 11
- Aug 12 - Aug 18

IMPORTANT: If session(s) I have requested above are full, my second choice would be:

Cabinmate Request (only one name will be guaranteed).

(Cabinmate request must be similar age. Request must also appear on the other camper's card. NO EXCEPTIONS.)



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REGISTRATION FORM (page 2)

CAMPER'S COMMITMENT

I want to become a camper at Camp Woodstock 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. (Without a refund)

Camper's Signature _____ Date _____

PARENT/GUARDIAN AGREEMENT AND REFUND POLICY

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 \$200 per session, per camper is for the purpose of securing your child's reservation at camp and as such is neither refundable nor transferable. The balance of the camp fee is due May 1st. Any refund of the balance will only be considered upon written request clearly stating the special circumstances (medical, emergency, etc) why the camper is unable to attend camp. A camper leaving camp before the end of the session for medical (not homesickness or behavior) or emergency reasons will receive a pro-rated refund for the days missed.

I hereby grant permission for the applicant to participate in all planned camp activities and programs including out-of-camp trips by camp vehicle, biking, horseback, or hiking, etc., understanding that competent leadership will be provided. 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, and video tape of the person named on this application in camp promotional materials. I understand that cabinmate requests are only guaranteed if both campers of similar age request each other.

Parent/Guardian Signature Required _____

The YMCA is a membership organization. Camper's membership fee is included within each session's fees.

PLEASE DO NOT WRITE IN THE SECTION BELOW FOR OFFICE USE ONLY

Tuition _____

Amount _____ Date _____ Balance _____

Amount _____ Date _____ Balance _____

| | DATE PAID | AMOUNT |
|------|-----------|--------|
| BANK | | |
| | | |
| | | |
| | | |

CREDIT CARD PLAN:

I have enclosed my \$200 check

I wish to charge my child's \$200 camp registration fee to my

MasterCard Visa American Express Discover

YOUR BALANCE OF THE CAMP FEE IS DUE MAY 1, 2012. PLEASE INDICATE BELOW WHETHER WE MAY CHARGE YOUR CAMP BALANCE TO YOUR CREDIT CARD ON MAY 1, 2012. PLEASE MAIL THE "LETTER TO MY LEADER" PRIOR TO YOUR CHILD'S CAMP DATE.

I wish to have my balance due charged on the same card on May 1, 2012.

Yes No

I have chosen to pay for Tier 1 Tier 2 Tier 3

Card# _ _ _ _ - _ _ _ - _ _ _ - _ _ _ _

Expiration _ _ / _ _

Cardholder's name (please print) _____

Authorized Signature _____

Date _____

Please send me information about Family Camp and Camp Woodstock's other year-round programs.

I would like to give to the Strong Kids Campaign Campership Program.

\$ _____

Please complete and sign both pages of registration form and return to:

CAMP WOODSTOCK YMCA
42 Camp Road, Woodstock Valley, CT 06282

Make Checks Payable to:

CAMP WOODSTOCK YMCA

Fax: 1-860-974-0754

Please do not request fax confirmation.

All confirmations will be sent by mail.

Caring. Honesty. Respect.
Responsibility.

That's the Y.