

# Newport County YMCA™

## General Information

Camper's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age (on first day of camp): \_\_\_\_\_  M  F

Are you a member?  Yes  No Grade entering in September 2010: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Swim Ability:  Non-swimmer  Beginner  Advanced

*Any comments regarding swimming ability:*

Mother's Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Father's Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

*List two other people (relatives, friends, neighbors) who could be called during camp hours in the case of illness or emergency, if you cannot be reached. The individuals listed below are the only individuals authorized to pick up your child. We will not release your child to anyone else without permission from parent/guardian.*

1. Name: \_\_\_\_\_

Phone (circle one: cell, home, work): (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

2. Name: \_\_\_\_\_

Phone (circle one: cell, home, work): (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

### Waiver of Liability:

*Make sure you understand and read carefully before signing below. By signing below, you are accepting all terms and conditions of this application.*

- My child has permission to participate in all camp activities. I authorize emergency medical treatment and transportation if necessary.*
- I authorize the Newport County YMCA to photograph or videotape my child during Camp, for possible use in public relations, promotions and fund raising.*
- I understand that my child is to abide by all camp rules and treat other campers and staff with respect. Failure to comply with this standard may result in dismissal from camp.*
- I authorize the transport of my child to/from the YMCA from an off site location if needed. No transportation to/from camps to off site weeks 1, 10 & 11.*
- I authorize my child to be picked up and dropped off at the Tiverton bus location, park & ride on Fish Road.  Yes  No*
- My signature indicates that as the parent/guardian of the applicant, I hereby grant permission for my child to participate in camp at the Newport County YMCA and represent that my child is physically able to participate in camp activities. In consideration of the applicant's being allowed to participate in the camp, thereby release the Newport County YMCA, its employees, officers from all claims resulting from illness, injuries or other damage, which may be sustained by the child during attendance at the camp. I furthermore agree and promise that we will not hold the Newport County YMCA or any of the above parties responsible in this respect.*

Parent/Guardian Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

*By signing you acknowledge all terms and conditions.*



## Registration Information

**Credit/Debit Card Payment:** A non-refundable \$25.00 per registered week deposit (\$50.00 for Water Sports or Martial Arts) is due upon registration. Payments are due in full or in even installments. We recommend that you pay by credit/debit card and have your payments be drafted automatically.

**Checks/Money Orders** should be made payable to the Newport County YMCA. All cash payments must be made in person at the YMCA. A late fee of \$10.00 will be incurred if payment is late. See camp brochure for payment plan options new for this year.

Credit Card Type:  Visa  MasterCard  American Express Card Number: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Check off list:

- Initial fees paid at time of registration. I will send in payments the first of each month. (5 months)
- Easy-Pay. Authorization to charge/draft my account for the remaining balance the first of each month until August 1st (5 months)
- Payment in full

Cardholders signature: \_\_\_\_\_ Please print your name: \_\_\_\_\_

**By signing the above, I agree to pay above total amount according to card issuer agreement.**

## Camper's Health Information

Does your child have any health disorders, behavior, allergies or medications ?

Yes  No

*If you checked off **yes** above, please fill out the Campers Health Form History (you may download this from the web at [www.newportymca.org](http://www.newportymca.org) or pick one up in the main office at the Newport County YMCA.*

### Medical immunizations record & physical required by June 1st, 2010

A copy of your child's medical immunization record and copy of a physical (within the last 2 years) signed by the child's family physician or pediatrician is required before entrance to camp. Has documentation been supplied?  Yes  No

Parents authorization: This health history is correct to the best of my knowledge, and the person herein described has my permission to engage in all prescribed activities, except as noted. In the event that I cannot be reached in an emergency, I hereby give my permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and order injection, anesthesia or surgery for my child as named above.

Physician: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Health Insurance Policy #: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Any special notations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check off the boxes for the week(s) you want your child enrolled in.

■ Indicates that camp is not offered that week.

week	1 June 21-25	2 June 28- July 2	3 July 5-9	4 July 12-16	5 July 19-23	6 July 26-30	7 August 2-6	8 August 9-13	9 August 16-20	10 August 23-27
5 Day: Member \$80.00/Non-member \$100.00 <b>Half Day Discovery</b> <i>(Ages 3-6*) must be potty trained.</i>										
5 Day: Member \$160.00/Non-member \$180.00 <b>Discovery</b> <i>(Ages 3-6*) must be potty trained.</i>										
5 Day: Member \$20.00/Non-member \$25.00 <b>Discovery AM Care</b>										
5 Day: Member \$20.00/Non-member \$25.00 <b>Discovery PM Care</b>										
Member \$145.00/Non-member \$175.00 <b>R.A.V.E</b> <i>(Ages 7-9, Boys and Girls)</i>										
Member \$145.00/Non-member \$175.00 <b>Sports</b> <i>Rookies (Ages 6-8, Boys and Girls)</i>	Hockey	Soccer	Basketball	Baseball	Hockey	Baseball	Basketball	Football	Soccer	Football
Member \$145.00/Non-member \$175.00 <b>Sports</b> <i>All-Stars (Ages 9-12, Boys and Girls)</i>	Hockey	Soccer	Basketball	Baseball	Hockey	Baseball	Basketball	Football	Soccer	Football
Member \$145.00/Non-member \$175.00 <b>Trailblazers</b> <i>(Ages 10-13, Boys and Girls)</i>	Summer Kick Off	Carpentry		Beach Bum	Newport & More	Top Chef	Beach Bum	Newport & More	Beach Bum	Top Chef
Member \$145.00/Non-member \$175.00 <b>Junior Gymnastics</b> <i>(Ages 5-6, Girls)</i>										
Member \$145.00/Non-member \$175.00 <b>Gymnastics</b> <i>(Ages 7-10, Girls)</i>										
Member \$145.00/Non-member \$175.00 <b>Rock Climbing</b> <i>(Ages 9-12, Boys and Girls)</i>										
Member \$145.00/Non-member \$175.00 <b>Adv. Rock Climbing</b> <i>(Ages 13-15, Boys and Girls)</i>										
Member \$145.00/Non-member \$175.00 <b>Aquatic Adv. Water Sports*</b> <i>(Ages 10-14, Boys and Girls)</i>		Aquatic Adventure	Aquatic Adventure							
Member \$180.00/Non-member \$210.00 <b>Water Sports *</b> <i>(Ages 10-14, Boys and Girls)</i>				Windsurfing & Kayaking	Surfing	Sailing	Windsurfing & Kayaking	Surfing	Sailing	
Member \$160.00/Non-member \$190.00 <b>Carpentry</b> <i>(Ages 14-15, Boys and Girls)</i>										
Member \$205.00/Non-member \$245.00 <b>Leaders in Training</b> <i>(Ages 13-15, two week sessions)</i>	Bi-weekly		Bi-weekly		Bi-weekly		Bi-weekly		Bi-weekly	
Member \$180.00/Non-member \$210.00 <b>Martial Arts*</b> <i>(Ages 7-13, Boys and Girls)</i>										
Member \$20.00/Non-member \$25.00 <b>AM Care</b>										

\*A non-refundable \$50 deposit required per week. All other camps require a \$25 deposit per week.