

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 2009: _____
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.

1. My child has permission to participate in all camp activities. I authorize emergency medical treatment and transportation if necessary.
2. I authorize the Newport County YMCA to photograph or videotape my child during Camp, for possible use in public relations, promotions and fundraising.
3. 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.
4. I authorize the transport of my child to/from the YMCA from an offsite location if needed. No transportation to/from camps to offsite weeks 1 & 10.
5. I authorize my child to be picked up and dropped off at the Tiverton bus location, park & ride on Fish Road. Yes No
6. 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 History

Does your child have any health disorders? Yes No

If yes, please explain: _____

Does your child have any behavior disorders? Yes No

If yes, please explain: _____

Please list any allergies to bee stings, food, medication, etc.: _____

Please list any medications currently being taken: _____

Will the medications need to be dispensed while at camp? Yes No

If yes, you must obtain, fill out and return, medical consent form at the Registration office prior to camp.

If yes, please explain: _____

Medical immunizations record & physical required by June 1st, 2009

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.

Newport County YMCA™

YCAMP™

Week	1 June 22-26	2 June 29- July 3	3 July 6-10	4 July 13-17	5 July 20-24	6 July 27-31	7 August 3-7	8 August 10-14	9 August 17-22	10 August 24-28
5 Day: Member \$80.00/Non-member \$100.00 Half Day Discovery (Ages 3-5*) must be potty trained. *5 year olds who have NOT completed Kindergarten										
5 Day: Member \$160.00/Non-member \$180.00 Discovery (Ages 3-5*) must be potty trained. *5 year olds who have NOT completed Kindergarten										
5 Day: Member \$20.00/Non-member \$25.00 Discovery AM Care										
5 Day: Member \$20.00/Non-member \$25.00 Discovery PM Care										
Member \$145.00/Non-member \$175.00 Explorers Guides (Ages 6-8, Boys and Girls)										
Member \$145.00/Non-member \$175.00 Explorers Navigators (Ages 9-12, Boys and Girls)										
Member \$145.00/Non-member \$175.00 Sports Rookies (Ages 6-8, Boys and Girls)	Soccer	Basketball	Baseball	Flag Football	Basketball	Baseball	Flag Football	Basketball	Smorgas-Sports	Soccer
Member \$145.00/Non-member \$175.00 Sports All-Stars (Ages 9-12, Boys and Girls)	Soccer	Basketball	Baseball	Flag Football	Basketball	Baseball	Flag Football	Basketball	Smorgas-Sports	Soccer
Member \$180.00/Non-member \$210.00 Outdoor Adventure (Ages 10-13, Boys and Girls)										
Member \$145.00/Non-member \$175.00 Junior Gymnastics (Ages 5-6, Girls)										
Member \$145.00/Non-member \$175.00 Gymnastics (Ages 7-10, Girls)										
Member \$180.00/Non-member \$210.00 Water Sports* (Ages 10-14, Boys and Girls)		Aquatic Adventure	Aquatic Adventure	Wind-Surfing	Surfing	Kayaking	Wind-Surfing	Surfing	Kayaking	
Member \$145.00/Non-member \$175.00 Rock Climbing (Ages 9-12, Boys and Girls)										
Member \$145.00/Non-member \$175.00 Adv. Rock Climbing (Ages 13-15, Boys and Girls)										
Member \$160.00/Non-member \$190.00 Volleyball (Ages 13-15, Boys and Girls)										
Member \$290.00/Non-member \$350.00 Triathlon I (2 Week Sessions) (Ages 10-12, Boys and Girls)								Bi-weekly		
Member \$290.00/Non-member \$350.00 Triathlon II (2 Week Sessions) (Ages 13-15, Boys and Girls)				Bi-weekly						
Member \$160.00/Non-member \$190.00 Carpentry (Ages 13-15, Boys and Girls)										
Member \$205.00/Non-member \$245.00 Leaders in Training (Ages 13-15, two week sessions)	Bi-weekly		Bi-weekly		Bi-weekly		Bi-weekly		Bi-weekly	
Member \$180.00/Non-member \$210.00 Martial Arts* (Ages 7-13, Boys and Girls)										
Member \$20.00/Non-member \$25.00 AM Care										

* \$50 deposit required per week. All other camps require a \$25 deposit per week.