

Camper Registration Form

Camper's name: _____

Age: _____ Date of Birth: _____ Male: _____ Female: _____

YMCA Member: Yes / No

Home address: _____

City, State, Zip: _____

Parent/Guardian: _____ DOB: _____

Home Phone: _____

Cell: _____

Email: _____

Emergency contacts (in addition to Parent/Guardian):

Name: _____ Phone: _____

Name: _____ Phone: _____

Physician: _____ Phone: _____

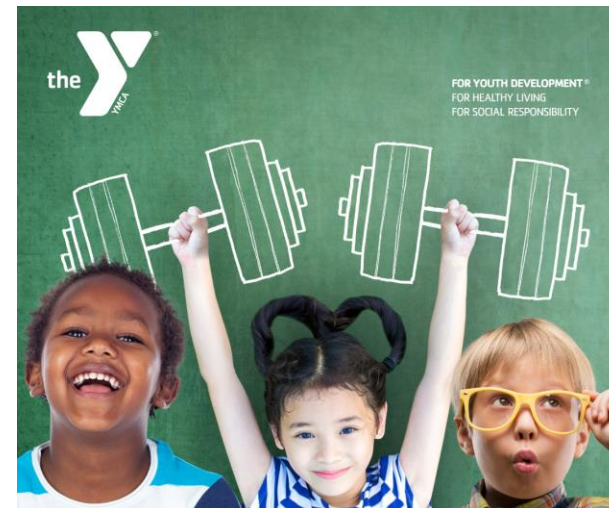
Allergies: Please list ALL known medication, food and other allergies:

Medications: Please list ALL medications being taken and ALL dietary restrictions:

Has participant had all of his/her required immunizations? Yes No

**Thank you to all the
generous donors who help
sponsor the Wilson Family
YMCA Camps!**

WILSON FAMILY YMCA
3436 Airport Blvd
Wilson, NC 27896
252.291.9622
wilsonymca.org



ENGAGING YOUTH IN MOTION & WELL-BEING

**KidsFitNation Summer Camp
(Ages 5-10 years)
WILSON FAMILY YMCA**

KIDSFIT NATION SUMMER CAMP 2020

At KidsFitNation Camp your child will overcome obstacles, learn teamwork, gain balance and coordination skills, and build confidence – all while having fun that is benefitting them physically and mentally.

What are some things to look forward to?

- Obstacle courses
- Line dancing
- Tumbling
- Fitness stations
- Games
- And more!

YMCA camps focus on teaching important values such as caring, honesty, responsibility, and respect. We offer fun and rewarding activities that help children develop valuable skills and gain confidence and self-esteem. We strive to strengthen and enrich the character of every child. We also have a lot of FUN!!

ONE WEEK ONLY!

August 3-7, 10 am – 12 pm
Youth ages 5-10

CAMP FEES

Fees must be paid in full at the time of registration. Cost covers the entire week of KidsFitNation Camp – 10 hours of fun and challenging physical activity engaging hearts and brains with motion and overall well-being. Plus, a YMCA “buff” that can be used as a headband, mask, hair tie, sweatband, etc.

Member	Non-Member
\$60	\$70

REGISTRATION CHANGES

We provide quality instructional time by keeping a 6:1 child to teacher ratio. No transfers will be allowed. Limited to 12 participants. First come, first served.

REFUNDS

Refund requests may be made in emergency situations. If the class does not meet a minimum of 6 participants, class will be cancelled. Requests for refunds must be made prior to the start of a cancelled session. Once a session has started, no refunds will be processed.

I would like to enroll my child in KidsFitNation Summer Camp.

August 3-7 (\$60/\$70 non-member)

Amount Due: _____

- I am enclosing payment in full.
 Cash Check Credit Card

Card Type (circle one) Visa or Mastercard

Card # _____

exp _____

Signature _____

Participant’s Agreement and Parent Wavier

I understand that even when every reasonable precaution is taken, accidents may occur. Therefore, in exchange for the Wilson Family YMCA (hereinafter referred to as “YMCA”) allowing my child to participate in YMCA activities, I understand and expressly acknowledge that when he/she uses the YMCA facility or program, they do so at their own risk. I understand that the YMCA will make every effort to contact me in case of an emergency pertaining to my child. If I am unable to be reached, the YMCA will try to contact an alternate adult listed on the registration form. The YMCA has my permission to secure medical attention for my child in the event of an emergency.

I release the YMCA, its staff, directors, officer and agents from all liability for any injury or damage connected in any way whatsoever to participation in YMCA activities, whether on or off YMCA premises. I understand that this release indicates, but is not limited to, any claims based on negligence, action, or inaction of the YMCA, its staff, directors, officers, members, agents, representatives or guests.

I authorize the staff of the YMCA, or appropriate medical personnel, to administer emergency medical treatment to my child or me. I also understand that I am solely responsible for all costs incurred as a result of such medical treatment.

Furthermore, I agree and grant permission to the YMCA to use photographs or video of my child or me in YMCA brochures, flyers, photo collections and other marketing initiatives.

I agree that only the adults on this form are allowed to remove my child from the YMCA program unless I notify the YMCA in writing. Under no circumstances will phone call authorizing child pick-ups be accepted at any time.

I have read, understand and voluntarily signed this agreement.

Parent/Guardian signature: _____

Date: _____