

2010 ENROLLMENT FORM

919 N. East Torch Lake Dr.
 Central Lake, MI 49622
 Phone: (231) 544-5915
 Fax: (231) 544-2916
 www.hayowentha.org

Camper's Name _____ M F Date of Birth _____ 09/10 Grade _____
 Street Address _____ City _____ State _____ Zip _____
 Parent/Guardian _____ Home Phone _____ Work Phone _____
 E-mail Address _____ Fax # _____ Cell _____
 Parent/Guardian _____ Home Phone _____ Work Phone _____
 E-mail Address _____ Fax # _____ Cell _____

This will be our child's _____ season at Hayo-Went-Ha Camps. YMCA Member Yes @ _____ No

ATTENTION, first year campers, referral by: _____

CAMP PROGRAM: _____

IMPORTANT
 All Campers will receive a unique T-shirt reflecting their camp program.
 Please circle size
 ADULT SIZES:
 Small Med Lg XL

Check session desired:

2 week programs

- Session 1 A (June 19 – July 2)
- Session 1 B (July 3 – July 16)
- Session 2 A (July 18 – July 31)
- Session 2 B (Aug. 1 – Aug. 14)

4 week programs

- SESSION 1: (June 19 – July 16)
- SESSION 2: (July 18 – Aug 14)

Campership opportunities (financial aid) and flexible payment plans are available for all campers. Please visit the web site or call camp for more information.

**-Contributions to the Hayo-Went-Ha "Send a Kid to Camp" fund will insure a worthy child a memorable summer experience. --*A \$250 deposit (Extended Trips \$500) must accompany this contract. Note: \$175 of the deposit is refundable if cancellation is received by May 1, 2010. Cancellation must be signed or confirmed and received in writing, by email or fax. We do not accept phone cancellations. After this date the entire deposit is forfeited. For Extended Trips a separate refund and cancellation policy applies. A 10% Late Charge will be added if paid after the due date. Camp fees are exclusive of: Horseback Riding, SCUBA, Laundry, Store Funds and Spending Money.
 A \$10 YMCA membership fee will be charged unless already a participating Y member.

Program Fees \$ _____
 *YMCA Member Fees \$ _____
 *~"Send a Kid to Camp" Donation \$ _____
 ~*Minus Deposit \$ _____
 1st Session Balance Due by May 1, 2010
 2nd Session Due by June 1, 2010 \$ _____

Optional Program Fees:

Horseback Lessons/Girls \$+ _____
 SCUBA/Boys \$+ _____
 Staff Photo \$+ _____

All correspondence will be communicated via email unless you check this box. By checking this box, you desire to have parent information sent via USPS.

In signing this form, we as parents/guardians, have made ourselves familiar with this enrollment application and agree with the basic principles of Hayo-Went-Ha Camps. We also agree that final decisions with regard to our child's stay at camp must be in the hands of the camp's administration.

I understand that although YMCA Hayo-Went-Ha Camps have taken reasonable steps to provide my child with appropriate training, equipment and skilled staff for his/her camp experience, I acknowledge that some inherent risks cannot be eliminated without destroying the unique character of these activities. Because of this potential risk, the YMCA requires in writing notification of any physical problems that campers may have.

Aware of the risks and willing to assume them, I hereby waive, release and agree to hold harmless YMCA Hayo-Went-Ha Camps, their representatives and successors for all claims or liabilities of any kind arising out of my child's participation in the camp experience. I have read the descriptions of the programs, understand the requirements for participation, and give my child permission to participate. I assume and accept full

responsibility for their participation. If a camper is not able to complete their enrolled program/trip requirements, their stay at camp will be assessed on an individual basis with parents(s) being notified. No refund is given for early departure from any program.

I hereby grant permission for YMCA Hayo-Went-Ha Camps to photograph, video, interview and display camper projects, or portions thereof through public view on the Hayo-Went-Ha Camps website or for promotional purposes. I agree to allow my child to participate in these projects without financial remuneration, and release YMCA Hayo-Went-Ha Camps from any liability arising from the use of said images. Camper names, addresses or phone numbers will not be included with any information posted on the web site or for promotional purposes.

(Required signature of parent or guardian)

Method of Payment

Check/Money Order Make all checks payable to: **State YMCA of MI**, Business Mailing Address: Hayo-Went-Ha Camps
 919 N. East Torch Lake Drive, Central Lake, MI 49622, Phone (231) 544-5915 Fax (231) 544-2916

VISA/MC # Exp. Date /

Authorized Signature _____ Amount Charged: \$ _____ SVC Code