

## 2023 YMCA Summer Camp Registration

Child's Information: (Please print)				
Child's Name (First//Last):	Pr	Preferred Name:		
DOB:/ Grade in Fall 2023:	)23: Age as of June, 1, 2023			
Race: African American Asian American Indi	an Pacific Islander	White	Hispanic	*see info on back
MaleFemale				
1st Parent/Guardian:				
Name:	Employer:			-
Home Address:				
City/State: Zip:				
Cell or Home Number:	Work Number: _			
2nd Parent/Guardian:				
Name:	Employer:			_
Home Address:				
City/State: Zip:				
Cell or Home Number:	Work Number: _			
Email Address (required): This is how we will concan be used				
Emergency Information:				
Known allergies:				
Medications or medical concerns:				
Child's Doctor:	Phone Number:			
If Parent/guardian cannot be reached, who e	lse should we notify i	n case of	an emerg	ency:
Name:Re	elationship to child:			_
Phone Number:				
Name:Re	elationship to child:			_
Phone Number:				
Is there anyone court ordered that is NOT aut	thorized to visit or pic	k up you	ır child?	
Name:	_ Relationship to child: _			

## A \$20 non-refundable, non-transferrable deposit per session is required at time of registration.

000000000000000000000000000000000000000	Please Select One Camp Per Session			
SESSION DATES	Camp Horizons	Camp Frontier		
Session 1: June 12th-16th				
Session 2: June 19th-23rd				
Session 3: June 26th-June 30th				
Session 4: July 3rd-7th (no camp on July 4)				
Session 5: July 10th- July 14th				
Session 6: July 17th- July 21st *color wars				
Session 7: July 24th-July 28th				
Session 8: July 31st- August 4th				
Session 9: August 7th-11th				
Session 10: August 14th-18th				
I have received and understand the rules, p  I understand all policies concerning not  I have received security cards for identificat  I hereby release and discharge the Alamana, and all claims of injury, illness, death, loss of amp.  I permit the Y to use images of my child as a including printed material, broadcast advertise.  I authorize the YMCA to draft the camp paymould any draft not be honored by my bank for ill be added to my account.	ion purposes when picking up my conce County Community YMCA, its agr damage that my child/ren may sure YMCA camp participant in internal sing, promotional videos and the YMCA can balances for my child/ren from	cancellation notice required.  hild from camp.  ents, volunteers and employees fr ffer as a result of participation in  and external promotional material  ACA website.  my account. I understand that		
It is my complete understanding that if in my way, I must give the YMCA a one week ate.				
Alamance County YMCA participates in the Unis program is to collect ethnic and racial data of tatistical use. Individual names are not identifie	n participants once a year. This dat			
		Date		
arent/Legal Guardian Signature:				

Yes, I will help make a donation for a child to attend Y Summer Camp.