

Camp Session Information
Session (please check all that apply)

Preschool/Kindergarten

- Session 1 June 27-29 \$90
 Session 2 July 6-8 \$90

Traditional Day Camp

- Session 1 June 13-17 \$150
 Session 2 June 20-24 \$150
 Session 3 July 11-15 \$150
 Session 4 July 18-22 \$150
 Session 5 July 25-29 \$150
 Session 6 August 1-5 \$150
 Session 7 August 8-12 \$150

Leaders In Training

- Session 1 June 6-10 \$170

LIT Placement

- Session 1 June 13-17
 Session 2 June 20-24
 Session 3 July 11-15
 Session 4 July 18-22
 Session 5 July 25-29
 Session 6 August 1-5
 Session 7 August 8-12

Horse Camp

- | | | | |
|------------------------------------|----------------------------|------------|-------|
| <input type="checkbox"/> Session 1 | Beginner 1:00-4:00 PM | June 13-17 | \$150 |
| <input type="checkbox"/> Session 1 | Beginner/All Day Camp | June 13-17 | \$170 |
| <input type="checkbox"/> Session 2 | Beginner 9:00-12:00 PM | June 20-24 | \$150 |
| <input type="checkbox"/> Session 2 | Beginner/All Day Camp | June 20-24 | \$170 |
| <input type="checkbox"/> Session 3 | Beginner 1:00-4:00 PM | July 11-15 | \$150 |
| <input type="checkbox"/> Session 3 | Beginner/All Day Camp | July 11-15 | \$170 |
| <input type="checkbox"/> Session 4 | Intermediate 9:00-12:00 PM | July 18-22 | \$150 |
| <input type="checkbox"/> Session 4 | Intermediate/All Day Camp | July 18-22 | \$170 |
| <input type="checkbox"/> Session 5 | Intermediate 1:00-4:00 PM | July 25-29 | \$150 |
| <input type="checkbox"/> Session 5 | Intermediate/All Day Camp | July 25-29 | \$170 |
| <input type="checkbox"/> Session 6 | Advanced 9:00-12:00 PM | August 1-5 | \$150 |
| <input type="checkbox"/> Session 6 | Advanced/All Day Camp | August 1-5 | \$170 |

Extended Care + Transportation Needed Yes or No

This service is \$35/per child/per week

Extended Care at Camp Needed Yes or No

This service is \$25/per child/per week

Transportation Only Needed Yes or No

This service is \$10/per child/per week

Y Camp Swim Lessons (Optional, at extra cost)

Fee: Members \$28 Program Participants \$56

Swim Session _____ Swim Level _____



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Registration Form

2011 DAY CAMP Dubuque Community Y



Dubuque Community Y
35 North Booth Street
Dubuque, Iowa 52001

Camper Personal Information

Name: _____

Male or Female

Address: _____

City, State, Zip: _____

Birth Date: _____ Age: _____

Grade Entering: _____

Dubuque Community Y member? Yes or No

Expiration Date: _____

Parent (s) Name: _____

Home Phone: _____

Work/Cell Phone: () _____

Work/Cell Phone: () _____

Emergency Contact: _____

Contact Phone Number: () _____

T-Shirt Size: YM YL AS AM AL AXL

Camper Health Information

Hospital Preference: _____

Physician: _____

Insurance Provider: _____

Parent Name: _____

Policy Number: _____

Immunizations: Please attach a current immunization record!

Medical History

Indicate any health or behaviors concerns, please explain.

Authorized Pick-Up Information

List those who are authorized to pick up your camper and remember photo ids are required for verification: *Your camper will not be released to anyone that is not listed here unless special arrangements are made with the Camp Director.

Name _____

Relationship _____ Phone () _____

Name _____

Relationship _____ Phone () _____

Name _____

Relationship _____ Phone () _____

Authorization/Liability Waivers

In case of medical emergency, in which I, or the emergency contact cannot be reached immediately, I hereby authorize the selected physician to secure treatment of my child

_____.

(Physician's Name)

Parent Signature _____ Date _____

Photo Release - I hereby give my consent to let my child be photographed for use by the Dubuque Community Y in newspapers, brochures or other media for the purpose of publicity or advertisement.

Parent Signature _____ Date _____

Waiver - I hereby waive any claim to injuries that may occur to my child while participating in activities related to the YMCA Union Park Camp.

Parent Signature _____ Date _____

Travel Release - I hereby give my consent to let my child be transported by the Dubuque Community Y.

Parent Signature _____ Date _____