

REGISTER ONLINE NOW! WWW.RIDGEWOODYMCA.ORG

(Please print and list only one camper per form)

Camper's Name _____
 Birthdate _____ Gender ___ Male ___ Female
 Address _____
 City _____ State _____ Zip _____
 Name of Parent(s)/Guardian(s) _____
 Phone (H) _____ Work Phone _____
 Cell Phone _____ Emergency Phone _____
 Parent/Guardian Email (required) _____

All campers accepted on a first come first served basis without regard to race, religion, sex, national origin or disability. For individuals and families in need, contact Julie Gallanty at ext. 332 for confidential financial assistance and application.

**RETURN TO: Ridgewood YMCA Day Camp Office, 112 Oak Street, Ridgewood, NJ 07450 or
 FAX TO: 201.493.0606**

Y's KIDZ - Circle session and options, then total columns.										
SESSION	1	2	3	4	5	6	7	8	9	TOTAL
Tuition	250	200	250	250	250	250	250	250	250	
Pre-Care	50	40	50	50	50	50	50	50	50	
Post-Care	115	95	115	115	115	115	115	115	115	
TOTAL										




CAMP PAMACKA - Circle session and options, then total columns.						
SESSION	1	2	3	4	5	TOTAL
Tuition	490	545	545	545	275	
Speciality (week 1 of session)	25	25	25	25	25	
Speciality (week 2 of session)	25	25	25	25	---	
Pre-Care	90	100	100	100	50	
Post-Care	90	100	100	100	50	
TOTAL						

TEEN TRIP - Circle sessions, then enter total.								
Session	1	2	3	4	5	6	7	TOTAL
Tuition	400	500	500	500	500	500	500	

Payment Information: Payment enclosed with registration:

\$ _____ Payment in full (Required by May 15, 2012)
 \$ _____ \$50 Membership Fee (Required if not a current YMCA member)
 \$ _____ \$100 per session non-refundable deposit
 \$ _____ Donation to the Day Camp Scholarship Fund
 \$ _____ Total

Method of payment:

Check (payable to Ridgewood YMCA)
 Visa  MC  Amex 
 Card# _____ exp _____

Registration Policy:

- Registration is on a first-come, first-served basis.
- Ridgewood YMCA reserves the right to refuse application or dismiss a camper at any time for just and reasonable cause.

Financial Terms:

- Deposit or payment in full must accompany registration.
- Total fees and all camper forms must be returned by May 15.

I understand that Day Camp is a recreational program. Parents with children that have special needs must speak with the director before registering for camp. I understand all fees are non-refundable and payment in full and all medical and personal forms are due no later than May 15th; and I hereby give permission for my child to be taken on trips that are part of camp activities; and if I cannot be reached, for the camp to provide whatever medical treatment is deemed necessary by the director; and for the camp to photograph or video tape my child for promotional purposes.

SIGN HERE: Parent/Guardian Signature _____ Date _____
 (All necessary permission and medical forms will be sent to you upon receipt of registration.)