

YMCA Camp Hanes 2011 Registration Form

Camper's Name _____ Birth date _____ Age at Camp _____ Male _____ Female _____

Camper's Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Previous number of years at Camp Hanes _____

School /Grade attending in Fall 2011 _____ Race (optional) _____

Father's Name _____ Mother's Name _____

Father's Business _____ Mother's Business _____

Work Phone _____ Work Phone _____

Family E-mail Address _____ Cabin mate Preferred (Must be mutual) _____

Emergency Contact (other than parent) **REQUIRED** _____ Phone Number _____

How did you hear about Camp Hanes? _____

Parents: Did you attend Camp Hanes as a camper or staff? Yes No If yes what years? _____

Does the camper have any special needs? Yes No e.g. Asthma, ADD/HD, physical impairments. Please describe: _____

Camper lives with: <input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian

<u>HOW TO REGISTER</u>	<u>Traditional Camp</u>	<u>Adventure / Leadership Camps</u>	<u>Specialty Programs</u>																																																																																																													
Check all sessions that you wish to attend. Complete both sides of the registration form and mail or fax it to the Camp Hanes Office. A \$175.00 non- refundable deposit (except for accident or illness) per session, which is part of the total camp fee, is required for this registration form to be processed and your child's spot reserved. Verification from a physician must accompany cancellations. \$75.00 is considered an administrative fee and is not refundable under any circumstances. If you have any questions feel free to give us call during regular business hours (8:00am-5:00pm Monday-Friday) <p style="text-align: center;">(336) 983-3131-voice (336) 983-983-4624-fax</p> <p style="text-align: center;">Register online www.camphanes.org</p>	<p><u>Climbers: Ages 6-9 (rising 1st-4th)</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Session 1</td><td style="width: 15%;">June 19-24</td><td style="width: 15%;">\$679</td></tr> <tr><td>Session 2</td><td>June 26-July 1</td><td>\$679</td></tr> <tr><td>Session 3</td><td>July 10-15</td><td>\$679</td></tr> <tr><td>Session 4</td><td>July 17-22</td><td>\$679</td></tr> <tr><td>Session 5</td><td>July 24-29</td><td>\$679</td></tr> <tr><td>Session 6</td><td>July 31-Aug 5</td><td>\$679</td></tr> <tr><td>Session 7</td><td>Aug 7-12</td><td>\$679</td></tr> </table> <p><u>Mountaineers: Ages 10-12 (rising 5th-7th)</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Session 1</td><td style="width: 15%;">June 19-24</td><td style="width: 15%;">\$679</td></tr> <tr><td>Session 2</td><td>June 26-July 1</td><td>\$679</td></tr> <tr><td>Session 3</td><td>July 10-15</td><td>\$679</td></tr> <tr><td>Session 4</td><td>July 17-22</td><td>\$679</td></tr> <tr><td>Session 5</td><td>July 24-29</td><td>\$679</td></tr> <tr><td>Session 6</td><td>July 31-Aug 5</td><td>\$679</td></tr> <tr><td>Session 7</td><td>Aug 7-12</td><td>\$679</td></tr> </table> <p><u>Explorers: Ages 13-15 (rising 8th-10th)</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Session 1</td><td style="width: 15%;">June 19-24</td><td style="width: 15%;">\$679</td></tr> <tr><td>Session 2</td><td>June 26-July 1</td><td>\$679</td></tr> <tr><td>Session 3</td><td>July 10-15</td><td>\$679</td></tr> <tr><td>Session 4</td><td>July 17-22</td><td>\$679</td></tr> <tr><td>Session 5</td><td>July 24-29</td><td>\$679</td></tr> <tr><td>Session 6</td><td>July 31-Aug 5</td><td>\$679</td></tr> <tr><td>Session 7</td><td>Aug 7-12</td><td>\$679</td></tr> </table>	Session 1	June 19-24	\$679	Session 2	June 26-July 1	\$679	Session 3	July 10-15	\$679	Session 4	July 17-22	\$679	Session 5	July 24-29	\$679	Session 6	July 31-Aug 5	\$679	Session 7	Aug 7-12	\$679	Session 1	June 19-24	\$679	Session 2	June 26-July 1	\$679	Session 3	July 10-15	\$679	Session 4	July 17-22	\$679	Session 5	July 24-29	\$679	Session 6	July 31-Aug 5	\$679	Session 7	Aug 7-12	\$679	Session 1	June 19-24	\$679	Session 2	June 26-July 1	\$679	Session 3	July 10-15	\$679	Session 4	July 17-22	\$679	Session 5	July 24-29	\$679	Session 6	July 31-Aug 5	\$679	Session 7	Aug 7-12	\$679	<p><u>Adventure Program: Ages 12-15</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Adventure 1</td><td style="width: 15%;">June 19-24</td><td style="width: 15%;">\$719</td></tr> <tr><td>Adventure 2</td><td>June 26-July 1</td><td>\$719</td></tr> <tr><td>Adventure 3</td><td>July 10-15</td><td>\$719</td></tr> <tr><td>Adventure 4</td><td>July 17-22</td><td>\$719</td></tr> <tr><td>Adventure 5</td><td>July 24-29</td><td>\$719</td></tr> <tr><td>Adventure 6</td><td>July 31-Aug 5</td><td>\$719</td></tr> <tr><td>Adventure 7</td><td>Aug 7-12</td><td>\$719</td></tr> </table> <p><u>Leaders in Training: Ages 14-15 (*Rising Sophomores)</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">LIT 1</td><td style="width: 15%;">June 19 – July 8</td><td style="width: 15%;">\$1429</td></tr> <tr><td>LIT 2</td><td>July 17 – August 5</td><td>\$1429</td></tr> </table> <p><small>*Camp prefers for the LITs to go home on weekends to rest for the following week. If the LIT is staying for the holdover weekend the additional fee will be added to the overall cost.</small></p> <p><u>Counselors in Training (*Rising Juniors)</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">CIT 1</td><td style="width: 15%;">June 19 – July 1</td><td style="width: 15%;">\$300</td></tr> <tr><td>CIT 2</td><td>July 10– July 22</td><td>\$300</td></tr> <tr><td>CIT 3</td><td>July 24 – August 5</td><td>\$300</td></tr> </table> <p><small>*Candidates must contact the Summer Director by January 31, 2011 with a letter of interest in the program. No deposit is required with letter and registration form. They will then be contacted to set up an interview for the program.</small></p>	Adventure 1	June 19-24	\$719	Adventure 2	June 26-July 1	\$719	Adventure 3	July 10-15	\$719	Adventure 4	July 17-22	\$719	Adventure 5	July 24-29	\$719	Adventure 6	July 31-Aug 5	\$719	Adventure 7	Aug 7-12	\$719	LIT 1	June 19 – July 8	\$1429	LIT 2	July 17 – August 5	\$1429	CIT 1	June 19 – July 1	\$300	CIT 2	July 10– July 22	\$300	CIT 3	July 24 – August 5	\$300	<p><u>Horseback Riding (All Programs)</u> Add to any traditional session \$120</p> <p><u>Paintball (Mountaineers and Explorers)</u> Add to any traditional session \$90</p> <p><u>Skeet Shooting (Explorers Only)</u> Add to any traditional session \$90</p> <p><u>Holdover Weekend *</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">June 24 - 26</td><td style="width: 15%;">\$150</td></tr> <tr><td>July 15 - 17</td><td>\$150</td></tr> <tr><td>July 22- 24</td><td>\$150</td></tr> <tr><td>July 29 – 31</td><td>\$150</td></tr> <tr><td>Aug 5 – 7</td><td>\$150</td></tr> </table> <p><small>*Used for extending into a second session.</small></p> <p style="text-align: center;"><u>Camp Imagine*</u> June 28-July 1 \$319</p> <p><small>*This is a program works with the Autism Society of Forsyth County.</small></p>	June 24 - 26	\$150	July 15 - 17	\$150	July 22- 24	\$150	July 29 – 31	\$150	Aug 5 – 7	\$150
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PARENT / GUARDIAN AGREEMENT – Please read and sign

The Program Director reserves the right to decline the application of any child, or send home any child who, according to the Director’s discretion, is not a desirable associate for the other campers, or puts him/herself or others at risk.

Photographs will occasionally be taken of the children during the Program. I, the undersigned, consent to the use of pictures of my child for displays, brochures, and promotional materials with no compensation to my child or me.

I, the undersigned, give my permission for my child to leave the Camp Grounds with authorized Branch staff for scheduled trips and outings.

Acknowledgement of Risk of Injury/Release and Waiver. I acknowledge and understand that there may be a risk of injury involved in the activities, which my child will engage in during the program. In consideration of the Branch allowing my child to participate in the Program and various field trips which may be taken from time to time, I hereby agree to release, waive, discharge, covenant not to sue, hold harmless, and indemnify, on behalf of respective officials, agents, employees, directors, members, officers and other staff members from liability to us and our child, as well as our personal representatives, assigns, heirs and next of kin, for any and all claims, suits or causes of action arising from or out of any injury, known or unknown, to property or body, that my child may suffer from participation in YMCA activities, field trips or the above described Program; and do hereby expressly assume the risk of injury associated with participation in said Program.

I, the undersigned, have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its meaning and significance.

Certification of Ability to Participate and Medical Authorization. I, the undersigned, hereby certify that to the best of my knowledge, my child is able to safely participate in the Program activities for which he or she has been registered.

I, the undersigned, understand that in the case of illness or injury of my child the Branch will try to notify me or the emergency contact listed on the Program Registration form. In the event of a medical emergency concerning my child at a time when either I or the emergency contact person cannot be notified, I hereby authorize Branch officials or my child’s caregiver, as applicable, to obtain necessary medical care and/or treatment, including but not limited to first aid, X-Ray, examinations, and aesthetic, medical or surgical diagnosis or treatment or hospital care and I hereby accept the sole financial responsibility for such medical care, first aid or treatment.

I agree to have my child examined by a physician within 24 months prior to their participation in the Program.

Parent/Guardian Signature: _____ Date: _____

Print Parent/Guardian Name: _____

Payment Method			
Check (Please make payable to YMCA Camp Hanes)			
Master Card	Visa	Discover	
Card #			
Name on Card			
Amount to be charged	\$	/ /	Exp Date.
Security Code			
Signature			

Computation Area	
Fees for Session(s) chosen	\$
Horseback Lessons	\$
Partner with Youth Donation (Help send a child to camp)	\$
Total Fee:	\$
Payment Enclosed (Must be all deposits for chosen sessions)	\$
Balance Due	\$

Our Parent Pack will be mailed to you once this registration form has been received. It will contain: Camper Confidential Form, Camper Health History Form, Family Handbook (What to bring etc), directions to camp, and more.

Please fill these forms out completely and return them to our office as soon as possible.

You must have your child examined by a physician within 24 months prior to their participation in our programs.

Call for information on setting up a Payment Plan for your registration fees. (336)983-3131.

Please mail or fax all registrations to:

YMCA Camp Hanes
1225 Camp Hanes Road
King, NC 27021
(336)983-3131 – voice
(336)983-4624 – fax
<http://www.camphanes.org>

