



# YMCA CAMP BERNIE VACATION CAMP

Please circle applicable date(s)

## April 2nd, 3rd, 4th, 5th & 6th Spring Recess

Camper Name: \_\_\_\_\_ M/F: \_\_\_\_\_ Grade: \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

School District: \_\_\_\_\_ Parent Email: \_\_\_\_\_

**Please use separate form for each child registered. Payment must be made a week in advance to hold place.  
Check all services that apply:**

- \_\_\_\_\_ Vacation Camp \$60 per day 9:00 am to 4:00 pm
- \_\_\_\_\_ Before Care \$15, 7:00 am to 9:00 am
- \_\_\_\_\_ After Care \$15, 4:00 pm to 6:00 pm

**Advantage School Program Participants:** \_\_\_\_\_ full time (5 days a week Before or After), \$60 waived  
\_\_\_\_\_ 2 days a week or more, \$50 Vacation Camp fee (9-4)

### Payment Information\*

\$ \_\_\_\_\_ Total Charge

### Method of Payment\*\*

[ ] Cash [ ] Check [ ] Credit Card

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Security Code: \_\_\_\_\_

**\*\*Payment is due a week in advance. Vacation Camp fees are non-refundable.**

\*if you would like your child to be able to purchase snacks, drinks, or souvenirs in the Trading Post (camp store) please send your child with a small amount of cash in their backpack. We can no longer add this to the vacation camp charge.

### PROGRAM WAIVER AND EMERGENCY INFORMATION

I understand that certain of the Ridgewood YMCA (YMCA Camp Bernie) activities have inherent risks and I hereby assume all risks and hazards incident to my [child's] participation in all Ridgewood YMCA, YMCA Camp Bernie activities. I hereby agree to waive and release all claims against and, indemnify and hold harmless, the Ridgewood YMCA, YMCA Camp Bernie, its volunteers, supervisors, officers, directors, trustees, participants, coaches, referees, as well as, organizers of any related event and any persons transporting participants to and from activities that are not on Ridgewood YMCA, YMCA Camp Bernie property from any claims or injury sustained during my [child's] use of the Ridgewood YMCA, YMCA Camp Bernie property, sustained during my use of equipment owned or leased by the Ridgewood YMCA, YMCA Camp Bernie or during my use of equipment or facilities at another property during an event in which the Ridgewood YMCA, YMCA Camp Bernie sponsors or participates.

Name of Participant: \_\_\_\_\_ Name of Parent/Guardian: \_\_\_\_\_

Emergency contact 1: Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Emergency contact 2: Name: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Medications (with instructions in original container) \_\_\_\_\_

Health problems/Histories/Allergies: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_