



# SCOTTSBLUFF FAMILY YMCA SUMMER DAYCAMP 2011

P.O. BOX 2423, 22 S. BELTLINE HWY E., SCOTTSBLUFF, NE 69363  
PHONE: 635-2318; FAX 635-1260

## FAMILY INFORMATION RECORD

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_/\_\_\_/\_\_\_ AGE: \_\_\_ M/F: \_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE IN FALL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY CAREGIVER'S NAME \_\_\_\_\_ RELATIONSHIP TO CAMPER \_\_\_\_\_

PREFERED PHONE \_\_\_\_\_ SECONDARY PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SECONDARY CAREGIVER'S NAME \_\_\_\_\_ RELATIONSHIP TO CAMPER \_\_\_\_\_

PREFERED PHONE \_\_\_\_\_ SECONDARY PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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### Day Camp Registration

Please Circle The Weeks Your Child Will Be Attending:

<b>May 2011</b>			
Week 1 31st—3rd			
<b>June 2011</b>			
Week 2 6th—10th	Week 3 13th—17th	Week 4 20th—24th	Week 5 27th—July 1st
<b>July 2011</b>			
Week 6 5th—8th	Week 7 11th—15th	Week 8 18th—22nd	Week 9 25th—29th
<b>August 2011</b>			
Week 10 1st—5th	Week 11 8th—12th		

**Cost:**

\$85 / week Members

\$105 / week Non-Members

\$25 / Daily Drop In

Additional children attending the same week receive a \$10 discount off weekly price only.

*Did you fill out a Medical Form?*

**FILL OUT REVERSE SIDE →**

**PERSON(S) TO WHOM THE CHILD MAY BE RELEASED BY THE CAREGIVERS (IF NO ONE, PLEASE WRITE "NONE")**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP TO CHILD \_\_\_\_\_

CELL PHONE \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP TO CHILD \_\_\_\_\_

CELL PHONE \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP TO CHILD \_\_\_\_\_

CELL PHONE \_\_\_\_\_

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**PERMISSION TO TRANSPORT**

As part of the YMCA Day Camp Program, daily activities are planned in and around the Scottsbluff area which require travel. Please give permission for your child to board and travel on the YMCA bus by signing below:

I hereby give permission for my previously named child to board and travel on the YMCA bus.

\_\_\_\_\_  
Parent/Guardian Signature

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**PARENT/GUARDIAN'S AUTHORIZATION**

In Consideration of my above named child being allowed to participate in the Scottsbluff Family YMCA/Trails West Camp and intending to be legally bound, I hereby waive, release, hold harmless, covenant not-to-sue, and forever discharge any and all rights, actions, and claims of negligence that I or my heirs, executors, or assigns may have against the YMCA as well as their respective officers, directors, trustees, agents, employees, representatives, successors, assigns, and affiliates for death, injury, loss, and any and all damages that my child may sustain and/or suffer in connection with his/her/their participation in the YMCA Camp. From time to time, pictures are taken of the children doing program activities, for the local newspaper, television station or other YMCA promotional material. It is essential to have parental permission before any pictures may be published. I give my permission for picture(s) of my child to be published in the local newspaper, television station or YMCA promotional material. I also agree to indemnify the YMCA for any defense, cost, or expense arising out of any claim of injury or death arising from his/her/their participation in this program. I am both legally competent and am legally responsible for the child listed below, who will be freely participating in this activity. I also understand that the YMCA staff will not take responsibility for children prior to 7:30 AM nor after 6:00 PM

CHILD'S NAME \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_