



2010 SUMMER CAMP REGISTRATION APPLICATION



YMCA
We build strong kids,
strong families, strong communities.

69-385 Farrington Hwy. Waialua, HI 96791 • 808-637-4615 • fax 808-637-8874 • www.camperdman.net • email: camperdman@ymcahonolulu.org

CAMPER INFORMATION		PLEASE PRINT CLEARLY - This is a camp permanent record.	
Last Name		First Name	<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth Date: Month Day Year Age		School Name	Returning Camper? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Grade Completed	May 2010
FAMILY INFORMATION: Applies to the Parents(s)/Guardian(s) with whom the camper legally resides. Non-custodial parent information is requested below.			
Camper Street Address		Father/Guardian 1 Last Name	Mother/Guardian 2 Last Name
City		First Name	First Name
State Province	Zip	Home Phone	Home Phone
Country		Work Phone	Work Phone
* Family YMCA Member Number		Cell Phone	Cell Phone
FAMILY STATUS (NON-CUSTODIAL)		Employer's Name	Employer's Name
Are camper's parents/guardians divorced or separated? <input type="checkbox"/> Yes <input type="checkbox"/> No		E-mail (Required) Camp Forms will be emailed here: <input type="checkbox"/>	E-mail (Required) Camp Forms will be emailed here: <input type="checkbox"/>
If yes, who has custody?		EMERGENCY CONTACTS: (required) List two contacts other than parent(s)/custodian(s)	
Should the non-custodial parent: (Check all that apply) <input type="checkbox"/> Be contacted in the event of emergency <input type="checkbox"/> Receive duplicate mailings <input type="checkbox"/> Receive invoice If you answered yes to any questions above, complete all boxes below with non-custodial parent information.		Name	Name
		Relationship to Camper	Relationship to Camper
		Home Phone:	Home Phone:
		Work Phone:	Work Phone:
Non-Custodial Parent:		Cell Phone:	Cell Phone:
Last Name		ADDITIONAL INFORMATION: Your feedback in this section is very important to us. Please tell us how you originally heard about our camp and check all boxes that apply. Please fill in specifics.	
First Name		Print Advertisement:	Internet:
Home Phone		<input type="checkbox"/> Magazine Ad Name:	<input type="checkbox"/> mysummercamps.com <input type="checkbox"/> ACA website
Work Phone		<input type="checkbox"/> School Flyer Name of School:	<input type="checkbox"/> campchannel.com <input type="checkbox"/> YMCA website
Cell Phone		<input type="checkbox"/> Flyer in a YMCA Name of YMCA Branch:	<input type="checkbox"/> gocamps.com <input type="checkbox"/> Other:
E-mail (Required) Camp Forms will be emailed here: <input type="checkbox"/>		<input type="checkbox"/> Community Event. (Which Event):	
Street Address		<input type="checkbox"/> Attended other programs at our Camp. Which programs?	
City		Word of Mouth. We heard about your camp through:	
		<input type="checkbox"/> A friend who attended our Camp <input type="checkbox"/> A relative who attended our Camp <input type="checkbox"/> Other:	
State	Zip	Who specifically?	
PARTICIPATION AGREEMENT: Briefly review your application. Are all applicable areas completed? Please read and sign your Participation Agreement.			
<p>I/We agree to pay the balance of the camp fees on or before June 1, 2010. I/We understand that reserved space cannot be held past that date without full payment. Refunds on balances paid, less the deposit amount, may be approved up to June 1, 2010. Any refunds that are granted will be disbursed in the same form that the payment was made. There are no refunds available after June 1, 2010. I/We understand that no refunds are given if a child leaves early because of homesickness or for disruptive behavior as determined by the Camp Director. The deposit amount is not refundable under any circumstance. The YMCA of Honolulu may use any photographs, slides or video of my child for public relations or promotional purposes. The person signing this registration accepts full responsibility for all incurred camp fees and expenses. Signature required before registration will be processed. * Must be a YMCA of Honolulu Island Wide Family Member for the member pricing options.</p>			
SIGNATURE OF PARENT:		PRINTED NAME OF PARENT:	Date

Camper Last Name: _____ **First Name:** _____

2010 SUMMER CAMP SESSION AND PAYMENT OPTIONS

RESIDENT CAMP One Week Sessions Sunday Check-In Friday Check-Out	SES 1 6/13 to 6/18	SES 2 6/20 to 6/25	SES 3 6/27 to 7/2	SES 4 7/4 to 7/9	SES 5 7/11 to 7/16	SES 6 7/18 to 7/23	SES 7 7/25 to 7/30	SES 8 8/1 to 8/6	SES 9 8/8 to 8/13	Deposit Per Session	Price Per Session	*YMCA of Honolulu Island Wide Family Member Price Per Session	TOTAL Number of Sessions Times Price Per Session
Traditional Camp (Age 6-15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$150	\$490	\$392	
Horsemanship Camp (Age 8-15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$150	\$765	\$612	
Surf Camp (Age 8-15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$150	\$650	\$520	
Rock Climbing Camp (Age 10-15)	<input type="checkbox"/>	<input type="checkbox"/>								\$150	\$775	\$620	
English As Second Language Camp (Age 6-15)							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$150	\$740	\$592	
Counselor In Training (Age 15-17)			<input type="checkbox"/>							\$150	\$1,950	\$1,658	
Bus Transportation Round Trip Nuuanu YMCA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$30		
Bus Transportation Airport to Camp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$50		
Bus Transportation Camp to Airport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$50		
Stayover Weekends (Fri to Sun) Must be registered in both sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$75		

Total Camp Fees

PAYMENT INFORMATION: All prices are per session. Prices must be paid in full if registering after June 1, 2010. Only complete registrations will be accepted. A \$25 fee will be applied to your account for returned checks. * Must be a YMCA of Honolulu Island Wide Family Member for the member pricing options.

I wish to pay the total camp fee now.

I wish to pay a non-refundable deposit of \$150 per session. I will pay the balance for all registered programs by June 1, 2010

Please enroll me in the payment plan. I understand the remaining balance will be charged in equal amounts on the 1st of each month until 6/1/2010.

Check (Made payable to YMCA Camp H.R. Erdman.) YMCA of Honolulu Family Island Wide Member #: _____

Visa Mastercard American Express Discover Expiration Date: _____

Card Number: _____

Billing Address: _____

Name on Card: _____

Signature: _____ Phone Number: _____

Mail Registration to YMCA Camp H.R. Erdman, 69-385 Farrington Hwy, Waiialua, HI 96791

Financial Assistance

YMCA Camp H.R. Erdman has a dedicated group of volunteers who help us raise money each year as part of our "Strong Community" campaign. This effort enables us to provide financial assistance for children and families who need financial support to participate in our camp programs. In 2009 we were able to provide over \$90,000 of financial aid! If you require financial assistance to make participation in camp possible, please contact the camp office for a financial assistance application.

Should you be willing to contribute to our 2010 "Strong Community" campaign, please include your tax-deductible donation with your campers registration.

Donation Amount \$ _____ Payment Method: Check Included Charge my credit card Bill Me

Mahalo!