



2010 WARNER-TULLY YMCA CAMP APPLICATION

Mail To: YMCA, 267 YMCA Place, Vicksburg, MS 39183
Or Fax (with credit card information) to: 601-634-0918
Phone: 601-638-1071

For Office Use Only

Payment Amt: _____

Receipt #: _____

Date: _____

Camper Information

Camper's Name _____ Preferred Name _____

Gender _____ Parent/Primary Email Address _____

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Birth ____/____/____ Age as of June 1, 2010 _____ Next Grade _____

Previous Summers at Warner-Tully (enter 0 if camper has never been to Warner-Tully) _____

Father's Name (First, Last) _____

Occupation and place of business _____

Home Phone (____) _____ Work Phone (____) _____ Cell (____) _____

Mother's Name (First, Last) _____

Occupation and place of business _____

Home Phone (____) _____ Work Phone (____) _____ Cell (____) _____

Are parents divorced or legally separated Yes No-If yes, with whom does the child live? _____

Cabin mate preference (limit 2): (1) _____ (2) _____

2010 Session Information - Please check the appropriate session(s):

	<u>Mini-Camps:</u>	<u>Date:</u>	<u>Fee Per Session:</u>		<u>Age:</u>
			<u>Y-Member</u>	<u>Non Y-Member</u>	
<input type="checkbox"/>	2-Night Mini-Camp	June 11 - 13	\$100	\$110	6 - 8
<input type="checkbox"/>	3-Night Mini-Camp	July 7 - 10	\$160	\$170	7 - 13
<u>Weeklong Camps:</u>					
<input type="checkbox"/>	Session 1	June 13 - 19	\$305	\$330	7 - 13
<input type="checkbox"/>	Session 2	June 20 - 26	\$305	\$330	7 - 13
<input type="checkbox"/>	Session 3	July 11 - 17	\$305	\$330	7 - 13
<input type="checkbox"/>	Session 4	July 18 - 24	\$305	\$330	7 - 13

PLEASE TURN OVER TO COMPLETE APPLICATION

Current YMCA Member? _____ Name of YMCA _____
 (Proof of current YMCA membership - copy of membership card, official letter from membership department, etc. - MUST accompany this application to be eligible for YMCA member savings.)

What school does the camper attend _____

Want to recommend a friend to Warner-Tully? Give name and address and we'll send a camp brochure:

ALL CAMP SESSIONS ARE CO-ED. CAMP FEE INCLUDES SNACKS & CRAFTS, ACCIDENT INSURANCE AND ALL CAMP COSTS. CAMPER'S NEED NO ADDITIONAL MONEY WHILE IN CAMP. A PARENT'S PACKET, INCLUDING A "WHAT TO BRING" LIST, MAP TO CAMP AND CAMPER HEALTH FORM WILL BE MAILED TO ALL REGISTERED CAMPER'S 4 WEEKS PRIOR TO CAMP SESSION.

Payment Information

*\$100 non-refundable sign-up fee (per camper/per weeklong session) required with completed application to reserve camper's place at camp, and is applied to fee total; balance due on or before arrival in camp. Mini-Camp sessions require full payment.

Registration Deposit for Weeklong Session (\$100 per session)	\$
Entire Weeklong Fee or Mini-Camp Fee paid at this time	\$
Optional Donation to Warner-Tully YMCA Camp Fund (tax-deductible)	\$
Total Enclosed	\$
Enclose check payable to Vicksburg YMCA or choose credit card option below: Visa MC American Express Credit Card # _____ - _____ - _____ - _____ Exp. Date _____	

Parent or Guardian Agreement

I understand that Warner-Tully YMCA Camp assumes no responsibility for injuries or illness which my child may sustain as a result of his/her physical condition or resulting from his/her participation in these activities. In case of accident or illness, the YMCA is authorized to secure emergency medical treatment. Prudent attempts will be made to contact the parents immediately. I understand the related expenses for the medical attention will be (my) the camper's responsibility. In consideration of the privilege of participating at Camp, I hereby voluntarily release and discharge Warner-Tully YMCA Camp, its agents, contract services, servants, and employees from any and all claims of injury, illness, death, loss or damage which my child may suffer as a result of his/her participation in these activities.

I agree to pay the balance of camp fees on or before the opening date of the session. The deposit is non-refundable. I understand that no refunds are given if a child leaves camp early because of homesickness or disruptive behavior as determined by the Camp Director. I give the YMCA permission to utilize my child's photograph or likeness in camp promotional materials.

I have read and agree to the terms and conditions as stated in this application/agreement. All information is true and accurate to the best of my knowledge.

Signature _____ Date _____