# 2010 YMCA CAMP ORKILA AND CAMP COLMAN REGISTRATION FORM

Complete this registration form, one per child, and make a copy for your records

## CAMPER INFORMATION

Last Name _____ First _____ Middle Initial _____

Address _____ City _____ State _____ Zip _____

Home Phone ( _____ ) _____ Age ____ Birthdate _____ Gender _____ Ethnicity (optional) _____

Grade in Fall 2010 _____ School currently attending _____

## LIVES WITH PARENT(S)/GUARDIAN INFORMATION

Parent/Guardian No. 1 _____ Relationship _____

Work Phone ( _____ ) _____ Company _____ Cell ( _____ ) _____

Parent/Guardian No. 2 _____ Relationship _____

Work Phone ( _____ ) _____ Company _____ Cell ( _____ ) _____

Primary household email address (for camp updates): Would you like to receive future materials (confirmation letter, etc.) electronically? ❑ Yes ❑ No

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## CAMP SESSION INFORMATION (do not include alternate choices, you will be contacted if a session is full)

Session No. _____ Dates _____ Program name _____ Fee _____

Cabinmates:* (first and last names) _____

Session No. _____ Dates _____ Program name _____ Fee _____

Cabinmates:* (first and last names) _____

***Cabinmates:** Making new friends is a big part of the camp experience. To keep our cabins welcoming to all, please limit your request to four friends of the same gender, grade, session and program. Requests must be mutual and received in writing at least three weeks before the session starts. For questions, call 206.382.5009.

**Parent/Guardian Signature** _____ Date _____

## PAYMENT INFORMATION

**Session fees:**

Total camp session fees ..... $ _____

Optional round trip transportation fee (add $30 for Camp Orkila; $15 for Camp Colman) ..... $ _____

**YMCA of Greater Seattle membership status:**

❑ YMCA Family Program Member, current through August 31, 2010

❑ YMCA Family Facility Member, current through August 31, 2010 (deduct $50) ..... $ – _____

YMCA branch: _____

❑ No YMCA Facility or Program membership (add $35 for a Family Program Membership) .. $ _____
Membership is good for one year for other YMCA of Greater Seattle programs

**Subtotal of fees** ..... $ _____

**Less amount enclosed or charged to a credit card** (minimum deposit required) ..... $ – _____
Minimum deposit per session per child is $50 until December 31, 2009, $100 thereafter

**Balance due by June 1, 2010** ..... $ _____

Tax deductible campership donation enclosed ..... $ _____

**Payment and refund policy:**

- Deposits are fully refundable until April 1, 2010.
- Regardless of registration date, deposits are non-refundable after April 1, 2010.
- Balance of camp fees are due June 1, 2010 and are non-refundable thereafter.
- Cancellations and session changes are accepted via mail, fax or email only (see below for contact information).
- Camping Services reserves the right to adjust programming or cancel sessions based on registrations.

For questions, call the Camping Services office 206.382.5009

**Method of payment:** ❑ Visa ❑ Mastercard ❑ Discover Card ❑ American Express ❑ Check (payable to: YMCA Camping Services)

Credit card number _____ Expiration date _____ /_____ Credit card amount $ _____

Name on card _____ Signature _____

Balance of payment options: ❑ Charge the balance on that card on June 1, 2010 ❑ Charge the balance in equal monthly payments through June 1, 2010

**Send the completed form to:** YMCA Camping Services, 909 Fourth Ave, Seattle, WA 98104 Fax: 206.382.4920 Email: colmanorkilainfo@seattleymca.org

| **Camp Use:** | **Camp Use:** Account No: | Payment: | Financial Aid: | Receipt: |
|---|---|---|---|---|
| ❑ Web ❑ Phone ❑ Fax ❑ Mail | **Branch Use:** Unit: | Deposit: | Financial Aid: | Receipt: |