



Camp Hazen YMCA

Summer Camp Application 2009

CAMPER INFORMATION

Last Name:	First Name:	Birthdate:
<input type="checkbox"/> Male <input type="checkbox"/> Female	Grade Sept 2009:	Returning Camper: <input type="checkbox"/> Yes <input type="checkbox"/> No
YMCA Member: <input type="checkbox"/> Yes <input type="checkbox"/> No Where?		email:

Cabin Mate Request
(Limited to one child. Request must be in same grade, and must be mutual)

FAMILY INFORMATION *applies to Parents/Guardians with whom the camper resides*

Street Address:	PARENT 1		PARENT 2		
	Last Name:		Last Name:		
	First Name:		First Name:		
State:	Zip:	Home Phone:		Home Phone:	

FAMILY STATUS (Non-custodial)

Has there been a divorce/separation in your family? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who has custody? _____ Should the non-custodial parent: <i>(Check all that apply)</i> <input type="checkbox"/> Be contacted in emergency <input type="checkbox"/> Receive duplicate mailings <input type="checkbox"/> Receive invoice <i>If you answered yes to any questions above, complete boxes below:</i>	Work Phone: Cell Phone: email: Occupation/ Employer:	Work Phone: Cell Phone: email: Occupation/ Employer:
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EMERGENCY CONTACTS *other than parent/guardian*

Name:	Name:
Relationship to Camper:	Relationship to Camper:
Home Phone:	Home Phone:
Work/Cell Phone:	Work/Cell Phone:

Payment	<input type="checkbox"/> Please charge "Total Enclosed" to my: <div style="text-align: center;">MC Visa Amex</div> Card # _____ Exp. Date _____
Deposit (\$250 Resident/\$150 Day) _____ 2009 Membership \$25 _____ Store Account _____ Session A "Special Ops" _____ TOTAL ENCLOSED _____	<input type="checkbox"/> Please charge balance of fee on 5/1/09 <input type="checkbox"/> Enclosed is a check for total due.

Camp Hazen YMCA, 204 West Main Street, Chester, CT 06412
 phone: (800) 248-8244 fax: (860) 526-9520
 office@camphazenyumca.org

Tier Pricing Program Realizing that families have differing abilities to pay, Camp Hazen YMCA has instituted a voluntary 4-tier pricing program for our Summer Resident Camp and Day Camp programs. Please take a moment to look at the tier descriptions and choose the tier that is most suitable for your family. All children will have the same experience no matter which tier a family is able to pay. The tier selected by a family will be kept confidential.

<p align="center">Tier 1</p> <p>is based on the full cost of campers participating in the selected programs. <i>If you are able to pay this amount, please do so. Thank you.</i></p>	<p align="center">Tier 2</p> <p>is a partially subsidized rate that will enable families that just can't afford the full cost of the camp program. <i>Please, choose this rate if your family has the need to receive a subsidized rate.</i></p>	<p align="center">Tier 3</p> <p>is a more heavily subsidized rate for families whose children would not be able to attend camp otherwise. <i>If you can not afford either of the higher rates, please pay this amount.</i></p>	<p align="center">Tier 4</p> <p>is a variable rate for families whose financial assistance need is greater than the subsidized rates above. We provide more significant financial assistance to families that demonstrate need through our Financial Assistance Program. <i>If you need additional assistance, please choose this option and complete a Financial Assistance application.</i></p>
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Resident camp 2009 (please **X** in box)

		Tier 1	Tier 2	Tier 3	Tier 4
Session A	6/28 - 7/10	<input type="checkbox"/> \$1360	<input type="checkbox"/> \$1260	<input type="checkbox"/> \$1160	<input type="checkbox"/> <i>Please complete financial assistance application</i>
<p align="center">"Special Ops": If interested in a specialized activity, select ONE of the following options</p> <p align="center"> <input type="checkbox"/> Scuba \$175 <input type="checkbox"/> Horseback Riding \$175 <input type="checkbox"/> Paintball \$175 </p>					
Session B	7/12 - 7/24	<input type="checkbox"/> \$1360	<input type="checkbox"/> \$1260	<input type="checkbox"/> \$1160	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session C	7/26 - 8/7	<input type="checkbox"/> \$1360	<input type="checkbox"/> \$1260	<input type="checkbox"/> \$1160	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session D	8/9 - 8/21	<input type="checkbox"/> \$1360	<input type="checkbox"/> \$1260	<input type="checkbox"/> \$1160	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Specialty Camp	8/23-8/28	<input type="checkbox"/> \$850	<input type="checkbox"/> \$800	<input type="checkbox"/> \$750	<input type="checkbox"/> <i>Please complete financial assistance application</i>
<p align="center"> <input type="checkbox"/> Drama <input type="checkbox"/> Sailing <input type="checkbox"/> Skate Park <input type="checkbox"/> Treetop Adv. <input type="checkbox"/> Mtn Bike <input type="checkbox"/> Fishing <input type="checkbox"/> Kayak <input type="checkbox"/> Windsurf </p>					
Specialty Camp - Horseback	8/23-8/28	<input type="checkbox"/> \$975	<input type="checkbox"/> \$925	<input type="checkbox"/> \$875	<input type="checkbox"/> <i>Please complete financial assistance application</i>

Day camp 2009 (please **X** in box)

		Tier 1	Tier 2	Tier 3	Tier 4
Session 1	6/29 - 7/10	<input type="checkbox"/> \$560	<input type="checkbox"/> \$510	<input type="checkbox"/> \$460	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session 2	7/13 - 7/24	<input type="checkbox"/> \$560	<input type="checkbox"/> \$510	<input type="checkbox"/> \$460	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session 3	7/27 - 8/7	<input type="checkbox"/> \$560	<input type="checkbox"/> \$510	<input type="checkbox"/> \$460	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session 4	8/10 - 8/21	<input type="checkbox"/> \$560	<input type="checkbox"/> \$510	<input type="checkbox"/> \$460	<input type="checkbox"/> <i>Please complete financial assistance application</i>
Session 5	8/24 - 8/28	<input type="checkbox"/> \$305	<input type="checkbox"/> \$280	<input type="checkbox"/> \$255	<input type="checkbox"/> <i>Please complete financial assistance application</i>

Payment: A \$250 non-refundable registration deposit for resident camp, and a \$150 non-refundable registration deposit for day camp will reserve your space for each session. The balance is due by May 1, 2009. Camp Hazen YMCA will refund program fees for cancellations made 30 days prior to the start of the session (less deposit). Refunds are not given if a child leaves camp early for any reason.

Membership: Camp Hazen YMCA Membership is open to everyone without regard to race, color, sex religion, national origin, or disability status. For those campers who are not members of their local YMCA, a Camp Hazen YMCA membership must be purchased at the time of registration (individual \$25/family \$50)

Insurance: Camp fees do not include health and accident insurance. Parents/Guardians assume responsibility for any and all charges incurred for prompt medical attention.

Parent/Guardian Signature

Date