



# Camp Hazen YMCA

## Leadership Application 2010

PARTICIPANT INFORMATION		
Last Name:	First Name:	Birthdate:
<input type="checkbox"/> Male <input type="checkbox"/> Female	Grade Sept 2010:	Returning Camper: <input type="checkbox"/> Yes <input type="checkbox"/> No
YMCA Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	email:

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

Street Address:	<b>PARENT 1</b>		<b>PARENT 2</b>	
City:	Last Name:	Last Name:		
State:      Zip:	First Name:	First Name:		
<b>FAMILY STATUS (Non-custodial)</b> 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: (Check all that apply) <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>	Home Phone:	Home Phone:		
	Work Phone:	Work Phone:		
	Cell Phone:	Cell Phone:		
	E-mail:	E-mail:		
	Occupation/ Employer:	Occupation/ Employer:		
	<b>EMERGENCY CONTACTS <i>other than parent/guardian</i></b>			
	Name:		Name:	
Relationship to Camper:		Relationship to Camper:		
Home Phone:		Home Phone:		
Work/Cell Phone:		Work/Cell Phone:		
<b>Payment</b>				
No payments are due at this time. Once the applicant has been interviewed and accepted into the program an invoice will be sent. Once accepted into the program a \$350 non-refundable registration deposit will reserve your space. The balance is due by May 1, 2010. 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. LEA participants are required to have a current YMCA membership which can be purchased from Camp Hazen YMCA if you do not have a current membership with your local YMCA.				
<b>Camp Hazen YMCA, 204 West Main Street, Chester, CT 06412</b> phone: (800) 248-8244    fax: (860) 526-9520 office@camphazenyumca.org				

Please rank session preference #1 - #4

	Tier 1	Tier 2	Tier 3	Tier 4
<input type="checkbox"/> LEA Session 1      7/4 - 7/30 <input type="checkbox"/> \$2090 <input type="checkbox"/> \$1940 <input type="checkbox"/> \$1790 <input type="checkbox"/> Please complete financial assistance application				
<input type="checkbox"/> LEA Session 2      8/1 - 8/27 <input type="checkbox"/> \$2090 <input type="checkbox"/> \$1940 <input type="checkbox"/> \$1790 <input type="checkbox"/> Please complete financial assistance application				
<input type="checkbox"/> LEAs on the Road Session 1      6/27 - 7/16 <input type="checkbox"/> \$2090 <input type="checkbox"/> \$1940 <input type="checkbox"/> \$1790 <input type="checkbox"/> Please complete financial assistance application				
<input type="checkbox"/> LEAs on the Road Session 2      8/1 - 8/20 <input type="checkbox"/> \$2090 <input type="checkbox"/> \$1940 <input type="checkbox"/> \$1790 <input type="checkbox"/> Please complete financial assistance application				

### Applicant Essay

Please respond to the following questions on a separate sheet of paper

1. Why do you want to participate in the Camp Hazen Leadership Training Program?
2. What do you expect to gain from participating in the LEA program?
3. What do you see as your new responsibilities during your transition from camper (or participant) to LEA?
4. What activities, sports or extra-curricular activities are you involved in at your school or in your community?
5. List any previous Camp Hazen experiences:

### References

Please provide three, non-relative, references who would be comfortable talking about you.

Name: _____ Relationship: _____ _____ Phone: _____	Name: _____ Relationship: _____ _____ Phone: _____	Name: _____ Relationship: _____ _____ Phone: _____
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### Please Read & Sign:

**Payment:** A \$350 non-refundable registration deposit will reserve your space for each session once applicant has been accepted into the program. The balance is due by May 1, 2010. 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)

**Financial Assistance:** Camp Hazen YMCA strives to serve all people regardless of ability to pay. Financial Assistance information is available from the Camp Office.

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

Applicant Signature	Date	Parent/Guardian Signature	Date
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