

Schools Out Camp

Dates: April 5-9
 Times: 9:00 am - 4:00 pm
 Before/After Care:
 7 - 9 am/4 - 6 pm



**Birmingham
 Family YMCA**
 400 East Lincoln St
 Birmingham, MI 48009
 (248) 644-9036
 (248) 644-8378 Fax

Program Director
 Anne Marie Hauger

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



Financial Assistance Available.



A United Way Agency

Preschool (3-5 yr. olds)

Full Day: Facility Member \$160 Program Member \$200
 Program # 06-311-10

Half Day: Facility Member \$80 Program Member \$100
 Program # 06-311-11 A.M. Half Day
 06-311-12 P.M. Half Day

School Age (6-11 yr. olds)

Full Day: Facility \$160 Program \$200
 Program # 06-411-01

Before and After Care
included in the price

Pre-registration Required

Sign up now, spaces are limited! Camp activities include swimming, arts & crafts, games, and much more. ALL participants must bring a sack lunch, snacks, swimsuit, towel and weather appropriate clothing each day. Registration must take place by Wednesday, March 31st in order for preparation time.

Register by fax, mail, or in person. For more information call the YMCA at (248) 644-9036.

Registration Form – Holiday Break Camp
Mail to: Birmingham YMCA * 400 East Lincoln St* Birmingham, MI 48009

Child's Name _____ Age _____ Sex _____ E-Mail Address _____

Address _____

City, Zip Code _____

Home Phone / Work Phone _____

Parent / Guardian Name _____

Signature _____ Payment Method: Visa Discover Master Card Credit Card # _____

What To Bring:
 -Lunch and Snacks (peanut free)
 -Water Bottle
 -Out door clothing
 -Gym Shoes
 -Swimsuit and towel

Program Number
 (see above)

Total Amount Paid _____ Receipt # _____ Initials _____ Date _____

****Please fill out the back side of this form. It is required!****

SCHOOLS OUT CAMP EMERGENCY FORM

PLEASE PRINT CLEARLY

CHILD'S FULL NAME _____ BIRTH DATE _____ AGE _____ ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ EMERGENCY PHONE _____ NAME _____

MEDICAL INFORMATION

Is the camper under any special dietary regimen? If yes, please describe _____

Please list food allergies: _____

Is there any activity your child can not participate in? _____

Are there any problems that may confront your child (homesickness, moodiness, anxiety)? _____

With whom is the camper living with (in case of divorce or separation) _____

Please list any concerns: _____

I HEREBY GIVE PERMISSION: (Initial on the lines)

I hereby consent the audiovisual and/or promotional material for which my child has posed may be used by Young Men's Association of Metropolitan Detroit, its assigns or successors, in whatever way they may desire, including television; furthermore, I hereby consent that said materials for which they are made shall be their property, and they shall have the right to sell, duplicate, and reproduce in the form of advertising or otherwise publish and make other uses of such photographs, film, tape and plates as they may desire, free and clear of any claim whatsoever on my part. _____

I understand lunch and snacks will be provided by the parents each day and refrigeration is unavailable. _____

BEFORE AND AFTER CARE (an additional cost) (7-9 a.m. and 4-6 p.m.)

Time of Drop Off _____
Time of Pick Up _____ Parent's Initial _____

If you are using the before the after care program, we need to know the approximate time of drop off and pick up in order to staff the program properly

IMPORTANT 6 THE FOLLOWING MUST BE COMPLETED (LEGIBLY) AND SIGNED, BEFORE BEING ADMITED TO CAMP:

PARENT'S AUTHORIZATION: Parent/legal Guardian hereby identifies the following adult individual(s) into whose custody the camp may release their child (please include parent names if child is permitted to be picked up by them):

1. _____
(MOTHER'S NAME)
2. _____
(FATHER'S NAME)
3. _____
4. _____
5. _____
6. _____

Parents & other adults listed for pick up are required to show a Michigan Driver's License or State of Michigan I.D. EVERY time a camper is released!

With my signature, I certify that I understand and agree with the above conditions and believe the information supplied above is accurate to the best of my knowledge.

IN WITNESS WHEREOF, this _____ day of _____, 2010

Parent/Guardian Signature

Witness