



YMCA CAMP SEYMOUR

Outdoor Environmental Education

Homeschool Registration Form – FALL 2018

PLEASE SUBMIT REGISTRATION WITH PAYMENT

Mail: 9725 Cramer Rd KPN, Gig Harbor, WA 98329

Fax: 253-460-8897

Email: campseymour@ymcapkc.org

Parent Name _____ Home/Cell Phone _____

Address _____ City _____ State _____ Zip _____

Family Email _____

Please list any food allergies _____

List all people attending the Homeschool program:

| Participant Name | Birthdate | Grade | Gender | YMCA Member? |
|------------------|-----------|-------|--------|--------------|
| #1 | | | M F | Yes No |
| #2 | | | M F | Yes No |
| #3 | | | M F | Yes No |
| | | | M F | Yes No |
| | | | M F | Yes No |

Registration Agreement – Please sign to indicate understanding and agreement.

I understand that payment is due in full with registration. Enrollment is limited to 30 participants per Session and closes one week prior to each class. Fees are non-refundable, cancellations must be received 48 hours prior to the Session to receive a credit which can be used on a future Session. I understand that my child may be photographed and photographs/videos may be used in Camp Seymour promotional materials. If Participant is not a full member of the YMCA of Pierce and Kitsap Counties, a \$5 limited membership fee applies. All Children under the age of 9 must be accompanied by an adult. You may drop off your Student over the age of 9 for an additional fee of \$17.

Parent/Guardian Signature _____ Date _____

| Date | Theme | Participant Fee Member/Non-Member | Drop-off Fee Must be age 9-12 | Helper Fee age 13-17 | Adult Meal Only | 5 & under Meal Only | Total Due |
|----------|-------------------|--|--------------------------------------|--------------------------------------|-------------------------------------|-------------------------------------|-----------|
| Sept. 07 | Water | <input type="checkbox"/> \$26 <input type="checkbox"/> \$31 x ____ | <input type="checkbox"/> \$17 x ____ | <input type="checkbox"/> \$15 x ____ | <input type="checkbox"/> \$8 x ____ | <input type="checkbox"/> \$3 x ____ | |
| Oct. 19 | Zip Line* | <input type="checkbox"/> \$26 <input type="checkbox"/> \$31 x ____ | <input type="checkbox"/> \$17 x ____ | <input type="checkbox"/> \$15 x ____ | <input type="checkbox"/> \$8 x ____ | <input type="checkbox"/> \$3 x ____ | |
| Oct. 19 | Forest | <input type="checkbox"/> \$26 <input type="checkbox"/> \$31 x ____ | <input type="checkbox"/> \$17 x ____ | <input type="checkbox"/> \$15 x ____ | <input type="checkbox"/> \$8 x ____ | <input type="checkbox"/> \$3 x ____ | |
| Nov. 2 | Reptile & Archery | <input type="checkbox"/> \$26 <input type="checkbox"/> \$31 x ____ | <input type="checkbox"/> \$17 x ____ | <input type="checkbox"/> \$15 x ____ | <input type="checkbox"/> \$8 x ____ | <input type="checkbox"/> \$3 x ____ | |
| Dec. 7 | Marine | <input type="checkbox"/> \$26 <input type="checkbox"/> \$31 x ____ | <input type="checkbox"/> \$17 x ____ | <input type="checkbox"/> \$15 x ____ | <input type="checkbox"/> \$8 x ____ | <input type="checkbox"/> \$3 x ____ | |

Participant fee includes lunch. *Zip Line participants must be 9 years old or older and between 50 and 175 pounds.

Total Balance Due _____

Payment is by: Check/Money Order Visa MasterCard Discover American Express OASIS

Credit Card # _____ CVA _____ Exp. Date _____