

## 2024 Summer Camp Weekly Registration Form

Camper's Name: \_\_\_\_\_ Camp Group: \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Circle One: **Member** **Non-Member**

**Circle the options that fit your child's summer schedule**

	Full Week	Up to 3 Day Week	Days Attending (Circle)	Weekly Total		Full Week	Up to 3 Days Week	Days Attending (Circle)	Weekly Total
<b>Week 1</b> June 3-7	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____	<b>Week 10</b> August 5-9	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____
<b>Week 2</b> June 10-14	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____					
<b>Week 3</b> June 17-21	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____					
<b>Week 4</b> June 24-28	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____	<input type="checkbox"/> I'm electing to have payments withdrawn by: ___ Checking <ul style="list-style-type: none"> <li>• Please attach voided check if choosing this option</li> </ul> ___ Credit Card Credit Card #: _____ Name on Card: _____ Expiration Date: ___/___/___				
<b>Week 5</b> July 1-3		\$150 members or \$170 non-members	M T W	Total \$ _____	<input type="checkbox"/> In house/online weekly payments will be made by the parent/guardian				
<b>Week 6</b> July 8-12	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____	<input type="checkbox"/> <b>Special Arrangement.</b> Needs to be set up before start of attendance. Please let us know if you're unsure if your circumstances fall within this category. (CCAP, Grant, Ect)				
<b>Week 7</b> July 15-19	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____	<b>I authorize the Marshall Area YMCA to take camp payments as indicated above:</b>  Signature: _____				
<b>Week 8</b> July 22-26	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____	<b>Cancellation Policy:</b> Any changes made to the original registration may be made; as long as it is completed by Monday, three weeks PRIOR to the week of care. Changes made after one week prior to the child's registration week may receive a 50% refund or credit. Once a week of care begins, we will not give credits or refunds for that week.				
<b>Week 9</b> July 29-Aug 2	\$180 members or \$210 non-members	\$150 members or \$170 non-members	M T W H F	Total \$ _____					

Note: All payment information will be used solely for camp registration purposes and will be secured.