ADVENTURE CAMP

REGISTRATION Ages 5-12

Adventure Camp is a safe, healthy and enriching summer experience for children, ages 5–12. It's centered around growing, playing and thriving together. Art, aquatics, recreation and adventure abound at our camp. Your kids will love spending their summer with us! You can sign up for one week or all ten! A minimum of three days is required to register.

3-DAY PRICES: Members = \$120 / Community Members = \$126 **4-DAY PRICES:** Members = \$160 / Community Members = \$168 **5-DAY PRICES:** Members = \$200 / Community Members = \$210

HOME SITES:

- Main YMCA
- Goodnight Elementary

Field trips are scheduled once a week!

REGISTRATION FEES:

\$40 per child*

\$10 each additional child*

*Due at registration

PARENT CHECKLIST:

Please ensure your camper(s) arrive with the following items:

- Cold-style lunch [nut free]
- Two additional [healthy] snacks
- Water bottles
- Sunscreen

Camper Weeks	Adventure Camp Ages 5-12 7AM-6:30PM (circle days and/or weeks)*					
6/1-6/5	Daily Y - M	Т	W	ТН	F	
6/8 - 6/12	Daily Y - M	т	W	ТН	F	
6/15 – 6/19	Daily Y - M	Т	W	TH	F	
6/22 – 6/26	Daily Y - M	Т	W	TH	F	
6/29 - 7/3	Daily Y - M	T	W	TH	F	
7/6 – 7/10	Daily Y - M	Т	W	TH	F	
7/13 - 7/17	Daily Y - M	Т	W	TH	F	
7/20 – 7/24	Daily Y - M	Т	W	TH	F	
7/27 – 7/31	Daily Y - M	Т	W	ТН	F	
8/3 – 8/7	Daily Y - M	Т	W	ТН	F	
8/10 - 8/14	Daily Y - M	Т	W	TH	F	

CAMPER INFORMATION:



Name:			Boy 📙 Girl 📙 Ag	ge:
Shirt Size: YS	YM 🗌 YL 🗌	AS AM	AL 🗌	
Birth Date:	School:		Grade in 19/20:	_
Email Address:		Home Address:	:	_
City:	State: Zi	p: Y Member	r 🗌 Community Member	
Mother/Guardian:		Work P	Phone:	
		Cell Ph	one:	
Father/Guardian:		Work P	hone:	
		Cell Ph	one:	

PARENT AGREEMENT:

I wish to enroll my child in the session(s) at YMCA of Pueblo **Y Day Camp**, as noted. I have read all of the descriptions of the sessions, understand the requirements for participations and give my youth permission to participate. I will notify the Pueblo YMCA if my youth has any serious restrictions related to his or her participation. I have enclosed my **full deposit** with this registration. **I understand that my deposit is non-refundable and that payments are deducted the 1st or 15th of the month (or Monday, first day of service).**

Signature:	: Date:	