



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# CAMP POTAWOTAMI

## SUMMER 2020 REGISTRATION

Camper's Name \_\_\_\_\_

Male  Female Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Age at Camp \_\_\_\_\_ This will be my child's \_\_\_\_\_ year attending Camp Potawotami.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Cabin Mate Request: \_\_\_\_\_

Camper's must request each other and be within one year of age. Due to size of our cabins ONLY ONE REQUEST PER CAMPER CAN BE HONORED.

Parent 1  Guardian Name: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Work Ph: \_\_\_\_\_

Parent 2  Guardian Name: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Work Ph: \_\_\_\_\_

Are you YMCA members:  Yes  No If so, what branch? \_\_\_\_\_

**YMCA CAMP POTAWOTAMI STATEMENT OF INCLUSION:** The spirit of the YMCA mission is that everyone has the opportunity to participate as we build the character traits of caring, honesty, respect and responsibility.

The YMCA of Greater Fort Wayne gives equal opportunity to all people who participate in the YMCA through employment, program participation, membership, and volunteerism without regard to race, color, religion, gender, citizenship, genetic information, national origin, sexual orientation, economic status, age, disability or veteran status.

We recognize that the community is always changing and we are committed to providing a welcoming and safe experience at all times for all YMCA participants. We partner with families to determine how to best support individuals. Our Y camp is inclusive and welcomes all. Standards of age appropriate behavior are expected. Changing clothes and showering is done in private, and camp staff supervision is in place. Personal information is kept private and will not be shared without permission.

**PARENT/GUARDIAN AGREEMENT:** I approve this registration and certify that the proposed camper is in normal health and able to participate in camp activities. I understand the \$100 deposit will be applied to the camp fee and is not refundable under any circumstances. I agree to pay the balance of all fees by May 1, 2020 (when registering after May 1, 2020, please pay full amount). In case of early withdrawal due to accident, illness or emergency the camp fee will be prorated. I understand all requests for cancellation must be made in writing no later than three weeks prior to attendance. I agree that only one-half of the camp fee will be refundable if this registration is canceled less than three weeks prior to attendance. No refunds are given if a camper is removed from camp without the written consent of a health care specialist. I understand no refunds are given if the child leaves early due to homesickness or disruptive behavior.

Parent 1/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 2/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

