



2025 SUMMER CAMP REGISTRATION

Camper's Name _____ Age _____

Member _____ Non-Member _____ ODJFS _____ * ODJFS camp registration forms put in Tabitha's mailbox.

Parent/Guardian Name _____ Contact # (_____) _____ - _____ 2nd Contact # (_____) _____ - _____

CAMP: \$175 MEMBER / \$230 NON-MEMBER

BEFORE AND AFTERCARE (BAC) and Camp: \$195 MEMBER / \$250 NON-MEMBER

*You MUST pay a \$20 DEPOSIT to reserve your spot in camp. Registration is not complete until the deposit is made in full.
Please inform the YMCA as soon as possible if you decide to "drop out" of a camp so your spot can be opened for another child.
Deposits are non-refundable.*

	Camp	Camp w/ BAC	Total balance
WEEK 1 June 2-6	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 2 June 9-13	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 3 June 16-20	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 4 June 23-27	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 5 June 30-July 4	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 6 July 7-11	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 7 July 14-18	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 8 July 21-25	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 9 July 28-August 1	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____
	Camp	Camp w/ BAC	Total balance due
WEEK 10 August 4-8	<input type="checkbox"/>	<input type="checkbox"/>	Camp Fee _____ BAC _____ Deposit Fee _____ Total _____

Questions: Contact the camp director Nicky Naylor @ nnaylor@champsymca.org