CAMP TECUMSEH YMCA

Office Use Only: S:_____ Date:_____ $Rec:_____

Day Camp Registration 2020

Please Mail or Fax to: Camp Tecumseh YMCA, 12635 West Tecumseh Bend Rd, Brookston, IN 47923. FAX (765)564-3210
Questions? Call or email! Phone (765) 564-2898, e-mail: registrar@camptecumseh.org

Please print neatly: Camper First Name | Camper Last Name

Birth Date __/__/__ Age by camp ____ Gender ☐Male ☐Female Grade completed by Camp ____

Trailmate Request* (Only one will be accepted)**

*Camp Tecumseh will try to accomodate your Trailmate request, but because of circumstances may not be able to. Camp is a place to make new friends, and tries not to group several friends together, as it detracts from the camp experience for other campers in the group.
**Trailmates must be within 1 year of age. Your child's name must appear on your Trailmate's registration form.

Mother/Guardian First Name | Mother/Guardian Last Name

Mother/Guardian Primary Phone | Mother/Guardian Email Address

Mother/Guardian Secondary Phone

How many years will this year make for your camper to come to C.T. Day camp? ____

Home Address

City | State | Zip

Father/Guardian First Name | Father/Guardian Last Name

Father/Guardian Phone | Father/Guardian Email Address

Weeks of Camp:

You may register for any week(s)

- ☐ Week 1: June 15 - 19
- ☐ Week 3: June 29 - July 3
- ☐ Week 5: July 13 - 17
  - ☐ Equestrian Day Camp (Week 5)
- ☐ Week 7: July 27 - July 31

Bus Transportation Availability: (Limited bus spaces available.)

Bus Transportation Weeks are Available Only as Shown Below

Morning Bus Pickup Location

White County Bus runs weeks 1, 3, 5 and 7 only

☐ NONE ☐ Frontier ☐ Meadowlawn
☐ Oaklawn ☐ Woodlawn ☐ Reynolds

Afternoon Bus Drop Off Location

White County Bus runs weeks 1, 3, 5 and 7 only

☐ NONE ☐ Frontier ☐ Meadowlawn
☐ Oaklawn ☐ Woodlawn ☐ Reynolds

- ☐ Week 2: June 22 - 26
- ☐ Week 4: July 6 - 10
  - ☐ Equestrian Day Camp (Week 4)
- ☐ Week 6: July 20 - 24

Morning Bus Pickup Location

Carroll County Bus runs weeks 2, 4, and 6 only

☐ NONE ☐ 1st Assemb. ☐ Camden
☐ Flora ☐ Delphi ☐ Monroe St.

Afternoon Bus Drop Off Location

Carroll County Bus runs weeks 2, 4, and 6 only

☐ NONE ☐1st Assemb. ☐ Camden
☐ Flora ☐Delphi ☐ Monroe St.

* The camp fee is $145 per child per week. ($185/wk for Equestrian) If you use camp transportation, the fee is $30 extra per child per week.
* The fee includes all program costs, swim lessons, a horseback ride, professionally trained leadership and all kinds of fun!
* Registration deposit of $25 applies as a payment towards the fee.
* Financial aid available for those with need. Contact our registrar for more information.

Method of Payment: Please enclose payment by check or credit card number.

$ _____ Amount

☐ Please charge the entire fees to my credit card. By signing below, I agree to pay full fees due.
☐ I've enclosed a check for full fees.
☐ I've enclosed a check for the registration fee ($25 per week) and will pay by check 30 days prior to our camp session.

☐ Visa ☐ Mastercard ☐ Discover

Credit Card Number | Expiration Date | CVV # | Cardholder's Signature

PARENT MUST READ AND SIGN BELOW. Appropriate fees must accompany this application.
IMPORTANT: I certify that my child is healthy, and that, in case of accident or illness, Camp Tecumseh has my authority to secure and utilize medical attention if unable to communicate with me directly. I understand that there is some inherent risk in activities at camp and accidents sometimes occur. I understand that the camp fee does not include accident insurance and any medical costs incurred shall be covered by the camper family. I understand that no refunds are given if a child leaves camp early or is dismissed for disruptive behavior. I understand that Camp Tecumseh is only responsible for my child from 10 AM until 3:15 PM, not before pick-up or after drop-off from the bus. I give Camp Tecumseh permission to use photos or videos of my child for marketing and promotional purposes in both digital and print formats.

NOTE: $25 of the camp fee is a non refundable registration deposit. Cancellations within 14 days of camp date will receive no refund of any fees.

Parent Signature | Date

In the operation of the summer camp food service program, no child will be discriminated against because of race, sex, color, age, national origin, or handicap. Any person who believes that a child has been discriminated against in any USDA program related activity should write immediately to the Secretary of Agriculture, Washington, D.C., 20250

Last Name | First Name