



Melrose Family YMCA CAMP MELSTONE REGISTRATION PERMISSION FORM

Camp Melstone 2016

Please PRINT clearly:

Child's Name: _____ Camp Name: _____

Date of Birth: _____ School Attending in September 2016: _____

Identifying Information: Eye Color _____ Hair Color _____ Skin Color _____

Primary Language: _____ Height _____ Weight _____ Other _____

Child's Physician's Name: _____ Phone # _____

Address: _____

Per the Board of Health the following medical documentation is required: up to date immunizations and current physical exam (within the last two years; September 2014 to current date 2016). **NOTE:** Your child will be returned to you or the proper authorities on your child's first day of camp if the required documentation is not on file. It is your responsibility to provide the above documentation.

*Please list any medications your child may be on: _____

NOTE: It is the parent/guardian's responsibility to supply medication for each site that your child is registered for. Separate/additional medication must be provided for Melrose Extended Care.

*Please list any allergies your child may have, including physical reaction and staff instructions (attach additional pages if necessary): _____

*Please list any limitations/chronic conditions that would prohibit your child's full participation in camp (attach additional pages if necessary): _____

I understand that my child will only be released to person(s) on the authorized pick up list. A photo ID must be shown at each pick up or the child will not be released. If a child is to be picked up by someone other than those listed, parent/guardian must give Director prior authorization. Authorized parent/guardian pick up is on the registration form.

Authorized Persons	Phone #	Relationship to Child
_____	_____	_____
_____	_____	_____
_____	_____	_____

I have read, I understand and I agree to abide by the above policies/statements.

Parent/Guardian Signature: _____ Date: _____



CAMP MELSTONE REGISTRATION PERMISSION FORM

PARENT/GUARDIAN PERMISSIONS

Please read carefully, and mark NO [X] if you want to deny permission. If you do not mark NO [X], you are granting permission.

Table with 2 columns: Permission statement and response box (NO [X]).

PARENT/GUARDIAN AUTHORIZATIONS

Please read carefully and sign the bottom.

- I understand this document serves as the permission slip for my child to attend off-site field trips...
• I understand that I am responsible for transporting my child to and from the camp...
• I understand that all field trips are subject to change...
• I understand that parents/guardians must present a valid photo ID to YMCA...
• I understand that my child must comply with the camp's rules and standards...
• I hereby authorize certified staff of the YMCA of Metro North to give First Aid and CPR to my child as needed.

By signing below, I acknowledge that: (1) I have granted or denied the above permissions; (2) I agree to the parent/guardian authorizations; (3) I have read the Camp Melstone Family Handbook and agree to abide by all the policies... (6) I realize that participation in camp activities has some inherent risks.

I have read, I understand and I agree to abide by the above policies/statements.

Parent/Guardian Signature: _____ Date: _____



Melrose Family YMCA CAMP MELSTONE REGISTRATION PERMISSION FORM

Please PRINT clearly:

Child's Name: _____ Date of Birth: _____

Age as of June 20, 2016: _____ Gender (please circle): male or female

Address: _____ City: _____ State: _____

Zip: _____ Parent Email Address: _____

Your Child's T-Shirt Size (please circle one): Child: S M L Adult: S M L XL

#1 Parent/Guardian Name: _____

Relationship: _____ Authorized to pick up child? (please circle) yes or no

Home Address: _____

Work Address: _____

Home #: _____ Work #: _____ Cell#: _____

#2 Parent/Guardian Name: _____

Relationship: _____ Authorized to pick up child? (please circle) yes or no

Home Address: _____

Work Address: _____

Home #: _____ Work#: _____ Cell#: _____

Emergency Contacts (other than parents/guardians) are available 7:00am - 6:00pm and have authorized pick up:

Name: _____ Address: _____ Phone #: _____

Name: _____ Address: _____ Phone #: _____

- * Full payment is required for Extended Care and on-line registrations.
- * A non-refundable \$30.00 deposit per week/per child is required for walk-in registrations.
- * Completed registration, parent agreement forms and physicals/updated immunizations records must be on file at least two (2) weeks prior to your child attending camp.
- * If forms are not received at least two (2) weeks prior to your child attending camp, you will be in jeopardy of losing your child's spots with no refunds.
- * Outstanding balances are due one (1) week prior to you child attending camp.
- * A \$30.00 late fee per week/per child is charged to all balances not paid by the stated deadlines and you will be in jeopardy of losing your child's spots.
- * A \$15.00 late pick up fee is charged for every fifteen minute interval after official camp closing times due at pick up.
- * Cancellation/transfer requests are made in person at the Melrose YMCA Main Street Facility no later than two (2) weeks prior to the week you are cancelling/transferring out of. No monies will be refunded without a two (2) week notice.
- * A \$30.00 cancellation fee is charged to full day camps. A \$5.00 fee is charged to Extended Care. This fee is applied to both on-line credits & refunds.
- * A \$15.00 transfer fee is charged to all transfers.
- * Refer to the 2016 policy sheet for complete policies.

I have read, I understand and I agree to abide by the above policies/statements.

Parent/Guardian Signature: _____ Date: _____