



YMCA Camp Onyahsa Day Camp Registration Form 2010: Odyssey Too



Camper/Parent Info:

Male Female

Camper's Last Name _____ First Name _____ Date of Birth _____ Age (while at camp) _____ Present Grade _____

Street Address _____ City _____ State _____ Zip Code _____

Cabin Mate Request (for Thurs Overnighter)—*Cabin mate must be mutual, the same gender, age and in the same program. Requests are not guaranteed.*

Full Name of Parent(s)/Guardian(s) _____ Home Phone _____ Family Email Address—*Please print legibly.* _____

Mother's Work Phone _____ Mother's Cell Phone _____ Father's Work Phone _____ Father's Cell Phone _____

Emergency Contacts: *If parent or guardian cannot be reached.*

Name _____ Relationship to Camper _____ Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relationship to Camper _____ Home Phone _____ Work Phone _____ Cell Phone _____

Special Needs: *Does your child require special accommodations to meet disabilities or handicapping conditions?* Yes No

If yes, please explain: _____

YMCA Member: Yes No Branch Name _____ Type of Membership _____

Referred by: Sibling/Family Friend YMCA Newspaper Internet/Website Other _____

Confirmation Packet: Mail to Address Above (incl PO Box if applicable) OR Email to Address Provided (**SAVES CAMP MONEY, THANKS!**)

Years at Camp: Camper attended in (check all that apply) '01 '02 '03 '04 '05 '06 '07 '08 '09 Number of years _____

Participation Agreement & Refund Policy—SIGNATURE REQUIRED FOR ATTENDANCE

I understand and certify that the registrant's enrollment and participation at Camp Onyahsa and in its full range of activities is made knowingly and is completely voluntary. I have familiarized the registrant and myself with the Camp's program and activities. I recognize and accept all risks inherent to, and associated with attendance at Camp Onyahsa and participation in Camp activities. I have instructed the registrant in the importance of knowing and abiding by the Camp's rules, regulations, and procedures for the safety of the registrant and all Camp participants.

I understand that campers must follow Camp rules and regulations and that parents will be notified to take home any camper who violates these regulations. I further understand that in this event, **no refund will be made.** I agree to give written notification to the camp administration **at least one month** prior to the camper's arrival if the registrant has any disabling condition, special needs, custody irregularities, or if there is any reason why the camper may not participate fully in all Camp activities. Camp Onyahsa will not discriminate based on disability, provided that a camper's attendance does not endanger himself, herself, or others. Program descriptions and rates are subject to change without notice. Please contact the Camp office for information updates.

This application must be accompanied by a non-refundable deposit of \$25 for each session. I understand that all fees must be paid in full and in US funds, at least two weeks prior to the start of the selected camp session in order to hold the reservation. All spaces will be filled on a first-come, first-served basis. Please make checks payable to **YMCA Camp Onyahsa.** Any unclaimed discounts will be graciously accepted as donations to our Development Fund.

I have read the Camp brochure and the above policies and have described the above policies and Camp rules to the registrant. The registrant and I agree to these conditions and Camp

policies. I further grant permission for my child to leave the Camp on supervised field trips and to fully participate in all activities described in this brochure unless otherwise directed in writing. Furthermore, I grant permission for the use of his or her photo, voice, or image in promotional materials and public relations programming.

I hereby indemnify, release, forever discharge and hold harmless the Jamestown Area YMCA, YMCA Camp Onyahsa, its employees, officers, agents, staff, and volunteers from any and all claims, losses, expenses, demands, actions, suits, liability or damages of any nature including attorneys fees resulting from or arising out of any injury, illness, loss of life or property, or other damages to my child during his/her attendance at YMCA Camp Onyahsa.

Acceptance and participation requirements for the program and all activities are the same for all regardless of race, color, national origin, gender, age or disability, and there will be no discrimination in the course of the meal service. Camp Onyahsa meets or exceeds all New York State and Chautauqua County Health Codes. It is also fully accredited by the American Camp Association.



Signature of Parent or Guardian _____ Date _____

Any person who believes he or she has been discriminated against in any USDA-related activity should write or call immediately to: USDA, Director, Office of Civil Rights, 1400 Independence Ave., SW., Washington, DC 20250-9410 or call, toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice users). USDA is an equal opportunity provider and employer.

For Receipting Purposes

2010 Program Registration & Weekly Themes

Tiered Tuition: Realizing the current economy has resulted in families having differing abilities to pay for camp, we have instituted a voluntary Three Tier Tuition Program.

Tier 1 Rate: True weekly cost of quality camping that is still below national average tuition for similar programs.

Tier 2 Rate: Traditionally subsidized weekly tuition, which does not reflect the true cost of camp operations.

Tier 3 Rate: Heavily subsidized by local donors and available only for local* residents; *campers enrolled in schools in Chautauqua, Allegany, Cattaraugus, Warren & McKean Counties.* It does not reflect the true cost of camp operations. This rate is available to ALL registrants for Weeks A and/or B.

Day Camp Sessions (ages 5-10): ✓ Check the box of the session(s) you would like to attend.

A—6/21-6/25 B—6/28-7/2 C—7/5-7/9 D—7/12-7/16 E—7/19-7/23 F—7/26-7/30 G—8/2-8/6 H—8/9-8/13

Select Pricing Tier

1—\$185 2—\$165 3—\$140

General Information

- Days begin at JCC's North County Campus, 10825 Bennett Rd, Dunkirk at 9:00am and end at 5:15pm. Early drop off is available at 8:30 am and late pick-up is available until 5:30pm.
- Campers may be dropped off directly at Camp Onyahsa at 8:30am. Indicate preference below.
- Thursdays are Field Trip days and day camp t-shirts **must** be worn on this day. Cost for t-shirt is \$10; indicate size below.
- Lunch is included in the program fee or campers may bring their own lunches.
- Campers may attend an optional Thursday overnighter at Camp Onyahsa. Complete the section below if interested in this program.

Transportation: ✓ Check the box of your preference(s).

I plan to drop my camper off at: Camp Onyahsa in Dewittville OR Jamestown Community College-Dunkirk/Fredonia

I plan to pick my camper up at: Camp Onyahsa in Dewittville OR Jamestown Community College-Dunkirk/Fredonia

Permission for Optional Thursday Overnighter:

I give my child, _____, permission to attend the Thursday-Friday overnighter at YMCA Camp Onyahsa on the following date(s), during his/her day camp session(s).

A—6/24-6/25 B—7/1-7/2 C—7/8-7/9 D—7/15-7/16 E—7/22-7/23 F—7/29-7/30 G—8/5-8/6 H—8/12-8/13



Signature of Parent/Guardian _____

Print Parent/Guardian Name _____

Date _____

Payment Calculation

Total Camp Tuition (Total of all day camp weeks) \$ _____

Less Multi-Week/Sibling Discount

(For each full-week session beyond the 1st one by the same household, \$10 may be deducted. Pay full price the first week, and deduct \$10 from each week after the first.)

_____ Sibling/Multi-Weeks x \$10 = \$(_____)

\$25 Ony Association Fee \$ _____

(This annual per camper fee funds Camp's endowment. Current YMCA members are automatically enrolled at no charge.)

\$10 Day Camp T-Shirt \$ _____

Please select size:

Y Small 6-8 Y Medium 10-12 Y Large 14-16 Y X-Large 18-20

Adult Small Adult Medium Adult Large Adult X-Large

TOTAL DUE \$ _____

Amount Enclosed \$(_____)

(Must include a \$25 deposit per session)

Balance Due \$ _____

(Two weeks prior to camp session.)

Payment Type

Check enclosed Check # _____

Credit Card Visa MasterCard Discover

Card #: _____

Expiration Date: _____ Security Code: _____

Name on Card: _____

Cardholder Signature: _____

For your convenience, we can charge the above credit card for the balance due two weeks prior to camper's arrival.

YES! Charge my card for the balance due two weeks prior to arrival.

I am applying for a Camp Scholarship (financial assistance).

Mail completed form with payment to:

YMCA CAMP ONYAHSA

101 E. 4th Street, Jamestown, NY 14701

Phone: 716-664-2802 ext 238 Fax: 716-487-1174

Email: office@onyahsa.org Website: www.onyahsa.org

For Camp Office Use Only

Date Received _____ In computer _____ Confirmation Sent _____

Scholarship Rec'd Onyahsa Rotary Nash Creche

