



# SUMMER 2019 REGISTRATION FORM

## GENERAL INFORMATION:

CAMPER NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PREFERRED GENDER PRONOUN: \_\_\_\_\_ GRADE AS OF FALL 2019: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PARENT/GUARDIAN(S): \_\_\_\_\_

PARENT/GUARDIAN OCCUPATION(S): \_\_\_\_\_

PROGRAM FEES:	Full Day Rates	2 Week LIT Sessions	Extended Care at YMCA	Extended Care at Chickami
Family Member	\$353.00	\$590.00	7am-8am: \$50.00	8am-9am: \$50.00
Youth/Teen Member	\$390.00	\$650.00	5pm-6pm: \$50.00	4pm-6pm: \$100.00
Non Member	\$404.00	\$690.00	Camper Bus \$85.00	LIT Bus: \$110.00

Camp Sessions	Opening Week B 6/24-6/28	Session 1 7/1-7/5	Session 2 7/8-7/12	Session 3 7/15-7/19	Session 4 7/22-7/26	Session 5 7/29-8/2	Session 6 8/5-8/9	Session 7 8/12-8/16	Session 8 8/19-8/23	Closing Week 8/26-8/30
Camper 6-14yrs										
LIT (15 Years)		Session 1+2 LIT		Session 3+4 LIT		Session 5+6 LIT		Session 7+8 LIT		
AM Care at Y										
AM Care at Camp										
PM Care at Y										
PM Care at Camp										

AM Bus Stop Letter \_\_\_\_\_ Number \_\_\_\_\_ PM Bus Stop Letter \_\_\_\_\_ Number \_\_\_\_\_ No Bus Service Required \_\_\_\_\_

\*Please note that the only bus available opening and closing weeks is F1. A complete list of bus stops are on the back.

## PAYMENT INFORMATION:

Please Circle: MasterCard / Visa / Amex / Discover Card

Name on Card: \_\_\_\_\_

Charge Deposit \$ \_\_\_\_\_

Charge Full Tuition \$ \_\_\_\_\_

I would like to donate \$ \_\_\_\_\_  
To Camp Chickami \$ \_\_\_\_\_

Total amount to charge today \$ \_\_\_\_\_

### Other Payment Options:

I have 3<sup>rd</sup> party billing assistance.

I would like to set up a monthly draft

I authorize the West Suburban YMCA to charge fees associated with camp to my credit card.

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