



NORTHWEST VALLEY FAMILY YMCA 2019-2020 SCHOOL BREAK CAMPS

CHILD'S NAME _____ BIRTH DATE _____ GRADE (2019/20) _____

PARENT'S NAME _____ BIRTH DATE _____ (Required for registration)

ADDRESS _____ CITY _____ ZIP CODE _____

HOME # _____ WORK# _____ CELL # _____

PARENT'S EMAIL ADDRESS _____

PLEASE SELECT CAMP OPTION/DAYS NEEDED. PAYMENTS FOR CAMP MUST BE MADE PRIOR TO THE START OF CAMP.

2019 DATES	MEMBER	NON-MEMBER	2020 DATES	MEMBER	NON-MEMBER
<input type="checkbox"/> BUNDLE: OCT. 14-18	\$150	\$205	<input type="checkbox"/> BUNDLE: DEC 30-JAN 03	\$80	\$130
<input type="checkbox"/> MON., OCT 14	\$30	\$50	<input type="checkbox"/> MON., DEC. 30	\$30	\$50
<input type="checkbox"/> TUE., OCT 15	\$30	\$50	<input type="checkbox"/> THU., JAN. 02	\$30	\$50
<input type="checkbox"/> WED., OCT 16	\$30	\$50	<input type="checkbox"/> FRI., JAN. 03	\$30	\$50
<input type="checkbox"/> THU., OCT 17	\$30	\$50	<input type="checkbox"/> ACA EXTRA DAY: JAN. 06	\$30	\$50
<input type="checkbox"/> FRI., OCT 18	\$30	\$50	<input type="checkbox"/> MLK, JR. DAY: JAN. 20	\$30	\$50
<input type="checkbox"/> ACA EXTRA DAY: OCT 21	\$30	\$50	<input type="checkbox"/> BUNDLE: MAR. 16-20	\$150	\$205
<input type="checkbox"/> BUNDLE: NOV. 27 & 29	\$50	\$90	<input type="checkbox"/> MON., MAR. 16	\$30	\$50
<input type="checkbox"/> WED., NOV. 27	\$30	\$50	<input type="checkbox"/> TUE., MAR. 17	\$30	\$50
<input type="checkbox"/> FRI., NOV. 29	\$30	\$50	<input type="checkbox"/> WED., MAR. 18	\$30	\$50
<input type="checkbox"/> BUNDLE: DEC. 23-27	\$80	\$130	<input type="checkbox"/> THU., MAR.19	\$30	\$50
<input type="checkbox"/> MON., DEC. 23	\$30	\$50	<input type="checkbox"/> FRI., MAR. 20	\$30	\$50
<input type="checkbox"/> THU., DEC. 26	\$30	\$50	<input type="checkbox"/> ACA EXTRA DAY: MAR., 23	\$30	\$50
<input type="checkbox"/> FRI., DEC. 27	\$30	\$50	<input type="checkbox"/> SPRING RECESS: APR. 10	\$30	\$50

CAMP DAY INFO:

- Y ADVENTURES hours of operation are from 6:30AM to 6:00PM for ages 5 and older.
- Please send your child in comfortable clothes and closed-toed shoes.
- Please send a non-perishable lunch and morning snack and water bottle for your child.
- Afternoon snack will be provided. If your child has specific food needs, please send an alternative snack.
- QUESTIONS? PLEASE CONTACT ASHLEY BEAL AT ashley.beal@vosymca.org OR 602-688-5347

I have read, understand, and agree to adhere to the YMCA child care program Statement of Services, payment policies, and give the YMCA permission to use photographs of my child, in a group setting, for YMCA promotional materials.

Parent/Guardian's Signature _____

Date _____

PAYMENT INFORMATION			Office Use Only
\$	TOTAL DUE CAMP DAYS		DAXKO ID #
\$	TOTAL DUE TODAY		Date In _____ / _____ / _____
Payment:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK (EFT)	<input type="checkbox"/> CREDIT/DEBIT CARD
			Staff Name

Financial Assistance may be available to those that qualify.

This program is not licensed by the State of Arizona and operates under Arizona Revised Statute 36-884.6