



## Summer Camp 2026 Registration Form

Please complete this registration form. It is important that each area be completed, signed and dated. Thank you.

Camper's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Shirt Size: \_\_ YS \_\_ YM \_\_ YL \_\_ AS \_\_ AM \_\_ AL \_\_ AXL

Medical Concerns/Allergies: \_\_\_\_\_

Emergency contact #1: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency contact #2: \_\_\_\_\_ Phone #: \_\_\_\_\_

Others Authorized to Pick Child Up or Be Notified as Needed: \_\_\_\_\_

**Payment is due whether your child attends the program or not. One week vacation is allowed. Please check below your vacation week:**

*\$30 Registration/Activity Fee*

*Members: \$90/Week Non-Members: \$100/Week Financial Asst.: \$75.00/Week*

- |  |  |
|--|--|
| <input type="checkbox"/> Week 1: May 22nd, 26th-29th (no camp on May 25th) | <input type="checkbox"/> Week 7: June 29th– July 3rd |
| <input type="checkbox"/> Week 2: June 1st-5th                              | <input type="checkbox"/> Week 8: July 6th-10th       |
| <input type="checkbox"/> Week 3: June 8th-12th                             | <input type="checkbox"/> Week 9: July 13th-17th      |
| <input type="checkbox"/> Week 4: June 15th-19th                            | <input type="checkbox"/> Week 10: July 20th-24th     |
| <input type="checkbox"/> Week 5: June 22nd-26th                            | <input type="checkbox"/> Week 11: July 27th-31st     |

**The Union County YMCA has permission to: (Initial each that applies)**

\_\_\_\_\_ Involve my child in swimming

\_\_\_\_\_ Involve my child in field trips (no flip flops allowed)

\_\_\_\_\_ Involve my child in photos or videos taken for YMCA publicity purposes

\_\_\_\_\_ Transport my child

\_\_\_\_\_ I agree to send a refillable water bottle to the Y for my child.