



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

2019 SUMMER DAY CAMP ENROLLMENT APPLICATION

Application Start Dates: Enrollment applications will be accepted as follows: current Children’s Center participants starting 1/2/19; McGaw YMCA members 1/21/19; members of other Ys and non-members 1/28/19. Please use a separate form for each camper. Photocopies are acceptable.

CAMPER INFORMATION – If School’s Out, name and birthdate only

Camper’s Name _____ Gender _____ Date of Birth _____ Current Grade _____
 Address _____ City _____ State _____ Zip Code _____
 Parent/Guardian #1 Name _____ Parent/Guardian #1 Date of Birth _____
 Cell Phone _____ Carrier _____ Home Phone _____
 Work Phone _____ Email _____
 Parent/Guardian #2 Name _____ Parent/Guardian #2 Date of Birth _____
 Cell Phone _____ Carrier _____ Home Phone _____
 Work Phone _____ Email _____
 Who may we contact regarding payment and enrollment issues? _____

Is either Parent/Guardian a McGaw YMCA staff member? Full-time Part-time Supervisor: _____
 My camper has a sibling enrolled in a Children’s Center program. Sibling’s name _____ Program Name _____

NORTHWESTERN FAMILIES

What is your affiliation with NU? Faculty Full-time Staff Part-time Staff Full-time Student Part-time Student
 NU ID #: _____ Dept: _____ Parent’s Name: _____

YMCA MEMBERSHIP

Current Membership Status: McGaw YMCA Member Non-member
 To purchase or renew a McGaw YMCA automatic monthly membership, please check: Youth \$32/month Family \$115/month
 To receive member pricing, your camper must be a member at the time of registration through the end of program.

REGISTRATION

PRICING – Sign up for more weeks to receive a discount!

Early Bird registrations will also receive a discount!

Number of Weeks	Member Price per week Sign up by May 1st	Member Price per Week Sign up by June 5th
1	\$320	\$345
4	\$290	\$315
6	\$270	\$295
All 9	\$260	\$285

BRIDGE CARE – For Current School’s Out Participants only

Join us Thurs, June 6th and Fri, June 7th for low key activities to bridge the time between the end of school and the start of Day Camp.

Yes, enroll my camper in Bridge Care! \$125M/\$138NM

You’ll receive a separate confirmation of your enrollment in Bridge Care as space is limited.

Non-Member pricing is \$352 per week by May 1st. Or \$377 if registering after May 1st.

Camp Registration	Price	All 9 Weeks *special pricing	Week 1 June 10 - 14	Week 2 June 17 - 21	Week 3 June 24 - 28	Week 4 July 1 - 5*	Week 5 July 8 - 12	Week 6 July 15 - 19	Week 7 July 22 - 26	Week 8 July 29 - Aug 2	Week 9 Aug 5 - 9
*Week 4 is prorated for the July 4 th Holiday Extended Care is Free!											
Summer Day Camp Entering K- – 6 th (7:30am – 6p)	See table above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science & Nature Camp 4 th – 6 th (9a – 4p)	\$600M/ \$660NM		<input type="checkbox"/>				<input type="checkbox"/>				
Ultimate Outdoor Adventure 4 th – 6 th (9a – 4p)	\$600M/ \$660NM				<input type="checkbox"/>				<input type="checkbox"/>		

Once your registration has been processed, you will receive a confirmation email with information regarding your camper’s paperwork and directions to access your online portal.



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CAMPER REQUEST

I prefer my child to be in the same camper group as: _____

*This camper must be in the same grade. We will do our best to accommodate this request based on availability.

T-SHIRT SIZE Youth Extra Small Youth Small Youth Medium Youth Large Purchase a second T-Shirt for \$10!
 Adult Small Adult Medium Adult Large Adult XL *Additional items available at our camp store

How did you hear about us?

PAYMENT INFORMATION

Policies

- Full payment for each session is due prior to the session start date. PAYMENT MUST BE RECEIVED by the due dates noted below. If registering for a camp after the due date, full payment is due immediately. Camper will not be allowed to start with a balance due.
- Summer Day Camp families will receive a 2nd child discount of \$25 per week for each additional child also enrolled in Day Camp or Full Day Preschool. The discount applies to the lowest fee.
- Day Camp registration requires a non-refundable \$25 deposit per camper per week. Wait lists are started when a camp session is filled. There is no fee for a wait list enrollment. If your child is offered a spot in camp, the regular deposit will be due immediately and/or full payment will be assigned if the due date has passed.

Payment – Registration Deposit must be included for processing

Total Due:

\$_____ deposit (\$25 per week)
 \$_____ Bridge Care
 \$_____ Membership Fees
 \$_____ Extra T-Shirt (\$10)
 \$_____ Sponsor A Child
 = \$_____ Amount Included
 with registration

Check American Express Discover Visa MC Cash

Credit Card ACCT # _____

Exp. Date: _____ CVV: _____ Billing Zip: _____

The McGraw YMCA is a 501(C)(3) charitable organization. Please consider a tax-deductible contribution to help sponsor a child in Summer Day Camp for families who cannot afford to pay full price.

Sponsor a child in Summer Day Camp Amount to be included with your child's registration \$ _____

Draft Payment Plan: I want to have my remaining camp fees automatically deducted through a draft payment plan. Draft payments will be scheduled with the same form of payment as the deposit. Due dates are listed below.

Weeks 1 & 2 – April 1, 2019 Weeks 3 & 4 – April 15, 2019 Weeks 5 & 6 – May 1, 2019
Weeks 7 & 8 – May 15, 2019 Week 9 – June 1, 2019

I am applying for a scholarship. If you wish to apply, you must include an application and your most recent federal 1040 tax form. Your scholarship will be processed at the same time as registration. If we do not receive your 1040 at the time of registration, your scholarship will only be applied towards future payments. You will receive separate notification by mail about your scholarship award. If the scholarship award is not sufficient to enable your camper to attend, we will refund your deposit. You must notify us by the due date specified in your scholarship award letter to be eligible for a refund of your deposit.

I am approved for the Child Care Assistance Program or DCFS Assistance. You must include your approval letter with this form to pay the reduced \$5 deposit per week.

IMPORTANT INFORMATION

Please read and sign prior to registration

Late Registration Fees

After May 1st a late registration fee of \$25 will be applied towards all sessions, including specialty camps.

Special Needs

We are fully committed to the participation of all individuals in our programs, and will make every effort to meet your child's needs based on our available resources. Please contact George Wasginton at 847.475.8580 ext310 to discuss possible options **prior** to registration.



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Billing & Paperwork Information

Parent information packets and other informational materials will be sent to the parent's email provided at the time of registration. Invoices will be mailed two weeks prior to payment due dates. All invoices will be mailed to the camper's address provided at the time of registration. We are unable to send mailings to multiple addresses. Your parent information includes required state licensing forms as well as information about camp (what to bring, camp rules, etc.). Children's complete paperwork packet, including a physical exam within 6 months prior to the first day of camp (June 10, 2019) must be complete by April 26th.

Questions?

For Day Camp programming, email daycamp@mcgawymca.org. For Registration and Scholarships, contact Alyssa at 847.475.8580 x335 or alyssat@mcgawymca.org.

Parent Statement of Understanding – please read and check each statement below

- If my child has a current 504/Individualized Education Plan (IEP), I will include it with my application.
- I understand that, when my child(ren) arrives in the morning, I may not leave my child(ren) at the program sites unless I have signed in with YMCA staff.
- I give permission to photocopy all forms.
- I understand that I am responsible for following the policies and procedures outlined in the specific program guidelines including parent manuals. If I fail to meet my obligation to the program policies, the YMCA reserves the right to suspend my child(ren)'s participation in the program.
- I understand YMCA Staff is mandated by state law to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.
- I understand the YMCA is not responsible for lost, damaged, or stolen articles.
- I understand that the deposit is not refundable or transferrable and that failure to pay all fees, including late fees, for services rendered may result in termination of services. In the case of divorce, the registering parent is responsible for all payments.
- I understand program fees are NOT refundable. Classes missed due to weather, holidays, choice of party, disruptive behavior may not be made up, credited, or refunded.

I have read and understood these requirements and instructions:

Parent/Guardian Name (Please Print) _____

Signature: _____ Date: _____

Grant Information

Please select the information below so that we can accurately report diversity in our programs. This allows us to seek out additional grants and fundraising opportunities. **Information is completely confidential.** This is not required, but is greatly appreciated.

My child is eligible for Free/Reduced Lunch: Yes No

Number in Household _____

Which best describes your family's annual income?

- \$0 - \$14,999 \$30,000 - \$49,999 \$75,000 - \$99,999 \$150,000 and higher
- \$15,000 - \$29,999 \$50,000 - \$74,999 \$100,000 - \$149,999

I identify my child as:

- Ethnic data – Hispanic or Latino Not Hispanic or Latino
- Racial data – Asian or Asian American Black or African American Multiracial
- Mark one or more White American Indian or Alaskan Native Other
- that apply. Native Hawaiian or Pacific Islander

What is the primary language your family speaks at home?

Any additional languages?

For Staff use only: Date _____	Deposit/Amount Paid _____	Wait List _____	
Discount _____	Scholarship _____	Staff Initials _____	



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Member/Program Participant Release and Waiver of Liability and Indemnity Agreement

IN CONSIDERATION FOR PROGRAMS AND ACTIVITIES of the YMCA for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

In accordance with the McGaw YMCA's compliance with child safety best practices, everyone who enters the McGaw YMCA premises (age 18 and older) will be checked against the National Sex Offender Database using their name and date of birth, as it is provided on their state issued ID. Convicted sex offenders will not be permitted to enter McGaw facilities, hold memberships, participate in programs, or live in the residence.

IN FURTHER, CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILTIIY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasees or otherwise while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Illinois and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE.

Date / / PRINTED MEMBER/PARTICIPANT NAME: _____

MEMBER/PARTICIPANT SIGNATURE (guardian if under 18): _____

NAME OF CHILDREN IN PROGRAM: _____