

2010 YMCA Camper Application

Please complete this form and return with the appropriate deposit (*non-refundable, non-transferable*) see below.
 Mail to: **Camp Sky-Y; 5725 S. Senator Hwy Prescott, AZ 86303** or fax to: **928-445-1908**
 For questions regarding Camp Sky-Y or Chauncey Ranch please call 800-660-1385.

Grade in Fall _____; Age at Camp _____

Camper Name: _____ boy; girl; Date of birth ____/____/____

Home Address: _____ City _____ ST _____, Zip _____

Parent 1 Name: _____ email _____ Home: (____) _____

Employer: _____ Work: (____) _____ Cell: (____) _____

Parent 2 Name: _____ email _____ Home: (____) _____

Employer: _____ Work: (____) _____ Cell: (____) _____

Who is the camper living with? Parent 1 _____ Parent 2 _____ Other _____

Relationship if not parent: _____ Are you legal guardian? Yes ____; No ____

Emergency contact: _____ Relationship to camper: _____

Home: (____) _____ Work: (____) _____ Cell: (____) _____

Family Medical Insurance carrier or plan name: _____ Group # _____

Family insurance is always considered primary; camp carries secondary health & accident insurance.

Cabin Mate request: _____ One request per camper, please.

Cabin mate requests must appear on both campers registrations and must be both campers must be in the same age grouping. Requests are not guaranteed. We reserve the right to separate groups of more than 3 campers to facilitate new group/cabin friendships. Cabins are grouped in Villages by age, so campers of the same age but not sharing the same cabin are in the same Village.

Name/Session # _____ Session Date: _____ Fees (A or B) \$ _____

<div style="border: 1px solid black; padding: 5px; width: fit-content;"> _____ Camp Sky-Y _____ Chauncey Ranch Check one </div>	YMCA member ID # _____; or Program Member Fee \$30 \$ _____
	Transportation: Round Trip _____; To Camp _____; To Phoenix _____: \$65 \$ _____
	Chauncey Saddle Club (ages 9-12 only) (Optional) : \$100 \$ _____
	Chauncey Ranch Extra Trail Rides (ages 9-12 only) (Optional) – 3 Max \$25 each \$ _____
	Stay Over between Sessions; Yes ____; No ____ \$60 \$ _____
	Camp Store (optional) \$ _____
TOTAL \$ _____	
(Less Deposit or Payment Amount) \$ _____	
Balance Due \$ _____	

Registration requires a **Minimum Deposit** which is a part of the Camp Fee.
 \$100, Full wk program
 \$200, 2-3 Wk programs

Program Member Fee also required for non YMCA members.
 \$30 Program member fee

Credit Card # _____ Visa/MC/AmEx/Discover

Expiration _____ CV2# _____ **Make checks payable to: YMCA Camping Services**

TO PARENT OR GUARDIAN: Please check the registration information for accuracy. Please read the following statement and sign at the point indicated below. "Admission as a camper to Camps Sky-Y and/or Chauncey Ranch carries many privileges and responsibilities. Campers are expected to participate in the total life of camp: to work, play and live together. Camp Administration does not allow the use of tobacco, alcohol, illegal drugs or weapons. Registration application signifies my understanding and acceptance of these responsibilities – violators will be dismissed without a refund. In addition, should a behavior or discipline problem affect work with other campers or their enjoyment of camps Sky-Y and/or Chauncey Ranch, CAMP ADMINISTRATION RESERVES THE RIGHT TO DISMISS THOSE CAMPERS RESPONSIBLE, WITHOUT A REFUND. In the event of the withdrawal or dismissal from camp for any other reason than illness requiring the attention of a physician, I will pay the camp fee in full. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp administrator to hospitalize, secure proper treatment of, and to order injection, anesthesia or surgery for my child as named above. I will notify the Camp Director if my child has any serious restrictions related to his/her participation in the camp program. I also understand that the Valley of the Sun YMCA and its Camping Services Branch assume no responsibility for accidental injury to my child during his/her stay at the camps. Photographs of my child may be used for promotional materials."

Parents signature _____ Date _____

Camper Name: _____

Please fill BOTH sides of this form out and mail or fax back to the YMCA Camp office.

Camp Sky-Y								
Date	May 30-June 5	June 6-12	June 13-19	June 20-26	June 27-July 3	July 5-10	July 11-17	July 18-24
Session #	1	2	3	4	5	6	7	8
A-\$555	<input type="checkbox"/> Fee A	<input type="checkbox"/> Fee A	<input type="checkbox"/> Fee A	<input type="checkbox"/> Fee A	<input type="checkbox"/> Fee A		<input type="checkbox"/> Fee A	<input type="checkbox"/> Fee A
B-\$480	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B	<input type="checkbox"/> Fee B
Secret Agent Camp			<input type="checkbox"/> Fee A \$605		<input type="checkbox"/> Fee A \$605		<input type="checkbox"/> Fee A \$605	
Ecology Camp		<input type="checkbox"/> Fee A \$605		<input type="checkbox"/> Fee A \$605				
Teen Leadership Programs		CIT <input type="checkbox"/> Fee A \$1,000		Service & Leadership <input type="checkbox"/> Fee A \$605	CIT <input type="checkbox"/> Fee A \$1,000			

Chauncey Ranch								
Ranch Camp Date	May 30-June 5	June 6-12	June 13-19	June 20-26	June 27-July 3	July 5-10	July 11-17	July 18-24
Session #	1	2	3	4	5	6	7	8
A-\$555		<input type="checkbox"/> Fee A		<input type="checkbox"/> Fee A		<input type="checkbox"/> Fee A		<input type="checkbox"/> Fee A
B-\$480		<input type="checkbox"/> Fee B		<input type="checkbox"/> Fee B		<input type="checkbox"/> Fee B		<input type="checkbox"/> Fee B
Saddle Club \$100		<input type="checkbox"/> \$100 OR		<input type="checkbox"/> \$100 OR		<input type="checkbox"/> \$100 OR		<input type="checkbox"/> \$100 OR
TrailRide \$25 x		<input type="checkbox"/> \$25x		<input type="checkbox"/> \$25x		<input type="checkbox"/> \$25x		<input type="checkbox"/> \$25x
Vaqueros		<input type="checkbox"/> Fee A \$695		<input type="checkbox"/> Fee A \$695		<input type="checkbox"/> Fee A \$695		<input type="checkbox"/> Fee A \$695
Cowboy Camp		Cowboy Camp #1 <input type="checkbox"/> Fee A \$1535 <input type="checkbox"/> Fee B \$1460		Cowboy Camp #2 <input type="checkbox"/> Fee A \$1535 <input type="checkbox"/> Fee B \$1460		Advanced <input type="checkbox"/> Fee A \$1535 <input type="checkbox"/> Fee B \$1460		
& Teen Leadership Camp							CIT <input type="checkbox"/> Fee A \$1000	



YMCA

We build strong kids,
strong families, strong communities.