

SPRING BREAK VACATION CAMP !

APRIL 6 & APRIL 9-13, 2012



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Enjoy your Spring Break in the YMCA Camps outdoor playground! Take on the challenge course, go hiking, build campfires, explore creative arts and participate in fun sports and games! New friends, exploration and great experiences await you! Don't miss the fun—register now!

BREAKFAST, LUNCH and SNACK are all included in the price of camp!

NEW FOR THIS YEAR! A visit from our friends at the Cedar Run Nature Center and many more surprises! Sign up today!



AGES: 5-14 **TIMES:** Daily: 7 am– 6 pm

DATES: Friday, April 6 and Monday, April 9– Friday, April 13

LOCATION: YMCA Camps of Medford— drop off and pick up at the Ockanickon Dining Hall

RATES: Only \$50 per day per child for members*** *(About \$5 hour, including activities, 2 meals & snack!)*
Only \$60 per day per child for non-members *(About \$6/hour, including activities, 2 meals & snack!)*

*** A member is a child presently enrolled in the 2011 –2012 School's Out Program ***

REGISTRATION: DUE BY APRIL 2, 2012– Please print clearly and use one registration form per child.

Spring Break Vacation Camp has limited enrollment and will be filled on a first-come, first-served basis, so be sure to register soon! Please complete the information below along with the participation waiver on the back. Upon receipt of your registration, you will be sent a confirmation letter, directions, a "What to Bring" list, a health form to complete and other pertinent information.

PARENTS PLEASE NOTE:

Meal Times: Breakfast will start promptly at 8:30 am. If you wish to have your child eat with us, please arrive by 8:15 am. Thank you.

Please circle the days your child will be participating:

SPRING BREAK CAMP: Fri., April 6 Mon., Apr. 9 Tues., Apr. 10 Wed., Apr. 11 Thurs., Apr. 12 Fri., Apr. 13

Child's Name: _____ Sex: M F Date of Birth ___/___/___ Age: ___

Parent/Guardian Name _____

Address: _____ City: _____

Phone: _____ Email: _____

Payment Information

TOTAL \$ _____ () Check *Make payable to YMCA Camp Ockanickon*

() Visa () MC () AMEX () Discover Name on Card: _____

Card # _____ Expiration Date _____ Sec Code: _____

Billing Address: _____

Signature: _____

Please return this registration form with payment by **APRIL 2** to:
YMCA Camps of Medford 1303 Stokes Road Medford, NJ 08055 →

Please turn over

YMCA CAMP OCKANICKON, INC. PROGRAM AND TRAVEL WAIVER

YMCA Camp Ockanickon, Inc. conducts its programs with the best interests of all participants in mind. The Y attempts at all times to run programs that are educational, enjoyable and safe. Further, the activities of the Y are designed to further the educational, motivational and charitable objectives of the Y. Nonetheless, participants must understand that some of the activities of YMCA Camp Ockanickon, Inc. may involve inherent risks and hazards for which the Y cannot be held responsible. Because of the nature of Y's activities, injuries may still result even after reasonable precautions have been taken but it is acknowledged that YMCA Camp Ockanickon, Inc. cannot be held responsible in the event that injury occurs.

The undersigned represents that it knows of no legal, physical or health reason why he or she or the participating child (if the participant is a minor) cannot fully participate in the registered program.

The undersigned releases YMCA Camp Ockanickon, Inc. of all liabilities in the event that my child should be involved in an automobile or bus accident while being transported to and from YMCA Camp Ockanickon, camp activities on or off premises, or the hospital or doctor.

The undersigned understands that no refunds are given if a child leaves early because of homesickness or for disruptive behavior as determined by the Camp Director.

The undersigned grants YMCA Camp Ockanickon, Inc. full rights to copyright, exhibit, and publish in any medium including, but not limited to, editorial, illustration, promotion, advertising, Internet, or trade all photographs and/or video taken by the Y and its agents of me and/or my child while the child is participating at the Y's events.

Finally, by signing below, the undersigned hereby acknowledges that it is understood that YMCA Camp Ockanickon, Inc. is a non-profit corporation, organized exclusively for charitable and educational purposes, and as such, is immune from liability for the negligence of its agents, servants or employees under N.J.S.A. 2A:53A-7.

Name of parent/guardian
(Please Print)

Name of child
(Please Print)

Signature of parent/guardian

Date

**For questions about this and other programs, please call or visit us on the web:
Phone: 609.654.8225 Fax: 609.654.8895 Web: www.ycamp.org**