



YMCA Camp Greenville

# 2010 Family Camp Application

**April 3 - 4**

**May 28 - 31**

**August 8 - 13**

**September 3 - 6**

**December 31, 2010 - January 2, 2011**

### Family Information:

\_\_\_\_\_  
Registrant's Last Name, First Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
How did you hear about family camp?

### Please list other family members below:

\_\_\_\_\_  
Last Name, First Name Birth date

\_\_\_\_\_  
Last Name, First Name Birth date

\_\_\_\_\_  
Last Name, First Name Birth date

\_\_\_\_\_  
Last Name, First Name Birth date

\_\_\_\_\_  
Last Name, First Name Birth date

\_\_\_\_\_  
Other families you would like to be near/Cabin Requests

### Please select session(s) below:

Session Name	Session Begins	Session Ends
Easter	April 3 <sup>rd</sup> , 10 – 11AM	April 4 <sup>th</sup> , 10 – 11AM
Memorial Day (Free day included in cost!)	May 28 <sup>th</sup> , 4 – 6 PM	May 31 <sup>st</sup> , 1 – 2 PM
End of Summer	August 8 <sup>th</sup> , 4 – 6 PM	August 13 <sup>th</sup> , 1 – 2 PM
End of Summer (Half Week Option)	August 8 <sup>th</sup> , 4 – 6 PM	August 11 <sup>th</sup> , 10 – 11AM
Labor Day	September 3 <sup>rd</sup> , 4 – 6 PM	September 6 <sup>th</sup> , 1 – 2 PM
New Year's Eve	December 31 <sup>st</sup> , 4 – 6 PM	January 2 <sup>nd</sup> , 2011 1 – 2 PM

### Arrival and Departure:

\_\_\_\_\_  
Arrival Date(s) and Time(s) Departure Date(s) and Time(s)

Please note Arrival and Departure time for each session, based on the check-in/out times shown above. If you plan to arrive at a different time than expected, just let us know, and we'll leave the light on for you!

### Cabin Information:

- Ridgetop Cabins have indoor toilets and showers. Ridgetop Cabins have large porches for sitting. This group includes Gilpin/Cuthbertson, Crymes, and Mac's Cabin.
- Lakeside Cabins have three rooms. The Lodge rooms have a fireplace and a patio. These cabins share two bathrooms and are reserved for families willing to share a bathroom.
- Adventure Cabins have restrooms in the cabin. Family members can walk 50-200 yards to use the shower in bathhouses. Each Adventure cabin has a small porch for sitting or relaxing. (Available at Memorial Day, End of Summer and Labor Day)
- Children under the age of three may attend Family Camp at no additional charge.
- The price structure for 2010 represents no increase over 2009 for most sessions. A family of four will see their cost go down for the popular Labor Day Family Camp! Cost includes food, lodging, and all camp activities.
- Families are encouraged to share cabins, and it reduces your cost!
- Please see the attached Family Camp Brochure for more information on lodging, activities and sessions. You may also contact the Group Camping Coordinator at the (864) 836-3291 ext 108. Please call anytime!

### Office use:

	Date	Submitted	Returned	EOM
Application Received				
Deposit Received				

**Payment:**

\*No additional charge for children who are under the age of three on the first day of the session.

Payment Information	# People/Cabins	Cost (Adventure Cabin)	Cost (Ridgetop/Lakeside)	Subtotal
Easter (cost per cabin, includes up to four people)	___ Cabins	N/A	X \$180 =	
Number of Additional People	___ People	N/A	X \$40 =	
Memorial Day (cost per cabin, includes up to four people)	___ Cabins	X \$302 =	X \$359 =	
Number of Additional People	___ People	X \$70 =	X \$80 =	
End of Summer (cost per <i>person</i> for the session)	___ People	X \$302 =	X \$358 =	
End of Summer – Half Week (cost per <i>person</i> for the session)	___ People	X \$151 =	X \$179 =	
Labor Day (cost per cabin, includes up to four people)	___ Cabins	X \$720 =	X \$861 =	
Number of Additional People	___ People	X \$158 =	X \$180 =	
New Year's Eve (cost per cabin, includes up to four people)	___ Cabins	N/A	X \$359 =	
Number of Additional People	___ People	N/A	X \$80 =	
Total Cost				
Refundable up to sixty days prior to the start of the session.	Minus Enclosed \$200 Deposit(s), one for each session			
Balance Due Upon Arrival to Camp Greenville				
Please make check payable and mail with registration to: YMCA Camp Greenville Family Camp Registration P.O. Box 390 Cedar Mountain, NC 28718		<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express Amount to be charged: \$ _____   Sec Code: _____ Name as it appears on card: _____ Card Number: _____ Exp: _____   Signature: _____		
A \$200.00 deposit by check or credit card must accompany this application. Please send one deposit for each session.				
<input type="checkbox"/> Please check this box if you are paying with a credit card, and you would like us to charge the balance on the first day of Family Camp.				

**Medical/Consent:**

\*Please note pertinent information for each family member

_____	_____	_____	_____	_____
Family Physician Name	Office Phone Number	Insurance Company	Policy Number	Medications (Parents shall be responsible for all administration)
_____	_____	_____	_____	_____
Dietary needs	Allergies (Food, Insects, etc.)	Recent Illnesses/Activity Restrictions	Dates of Last Tetanus Shots	
_____	_____	_____	_____	_____
Emergency Contact	Relationship	Cell Phone Number	Home Phone Number	

\*This information is to be used by Camp Greenville staff only in the event of an actual injury or illness. They may not review this information unless such need arises.

**Mailing List, Photo Release**

I give my permission for any photos or videos taken of my family or me during the outing at YMCA Camp Greenville to be used for public relations. I give my permission for YMCA Camp Greenville to add me to their mailing list.

**Liability**

I hereby release YMCA Camp Greenville and the Greater Greenville YMCA and their employees, volunteers, and chaperones, from any financial or legal responsibility that may result from this outing. To insure prompt attention in case of serious accident or illness, I hereby authorize the persons responsible to incur expense deemed necessary and agree to pay for the same. Should the need arise; I give permission to the YMCA Camp Greenville to take me or other registrants on this form to a doctor or hospital for medical treatment. I also authorize an agency chaperone to execute any or all documents in my behalf, including necessary releases, which might be required by a medical facility to perform emergency care.

**Medical Authorization and Release**

Should I sustain or incur an accident or illness while attending YMCA Camp Greenville, I hereby authorize an agency official to execute any and all documents in my behalf, including necessary releases, which may be required by a medical facility to perform emergency care.

**Minor Release**

I certify that the participants named in this document is in good physical condition and that the information provided is accurate to the best of my knowledge. I, \_\_\_\_\_, give permission for my child(ren), \_\_\_\_\_,

Parent/guardian's name

Child(ren)'s name(s)

to participate in activities at YMCA Camp Greenville in Cedar Mountain, NC at Family Camp.

_____	_____	_____
Signing Parent Name	Signature	Date

Thanks for signing up for Family Camp! You will receive a registration packet 3-4 weeks prior to the first day of camp. If you have further questions please feel free to contact the Group Camping Coordinator at 864-836-3291 ext.108.

