

YMCA CAMP Duncan's Woods 2019 Registration Form Please print carefully and return to YMCA Registrar

Please print carefully and return to YMCA Registrar 3001 SE Oxbow Parkway, Gresham, Oregon 97080 Phone: 503.663.5813 • Fax: 503.663.2323 • hpenuel@ymcacw.org

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OFFICE USE ONLY	- 1
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For campers ages 13-15 years old: Child's Name: First	_	•		•	•	•	
Address							
Home Phone							
F-Shirt Size O Youth Small O Youth Med. O Youth Large First Parent or Guardian Name			_				
Address			City		State	Zip	
Business Phone Cell		Email					
Second Parent or Guardian Name							
Address			City		State	Zip	
Business Phone Cell							
Name and Age of Siblings							
How did you hear about Camp Duncan's Woods? O A frienc				Picked up a	Brochure from the Y	MCA O Other:	
District and School Attending in Sept 2019							
rom camp without a refund of fees. Camp registration ar that the deposit is nonrefundable. I agree to pay the remo payment. If I register after July 1, 2019 I understand that notal camp fee is refundable 1 week prior to the start of within 1 week of their session start date, or does not sho	my child's session.	I understan	d that no refun	ve basis. Inc than July 1, amper's regis ds are given	nuded nere is the rei 2019. A space will i stration. I understar if a child leaves can	quired \$50 deposit; I u not be held past July 1 id that after July 1, 50 np early for any reason	nderstand without ful % of the , drops
Parent or Guardian Signature					Date	/ /	_
Photo Release: I authorize the YMCA to take, possess programs (This includes cabin group photographs.)	and use photogra	phs, slides	, and/or video	of the appli	cant as may be ne	eded for its public rel	ations
Parent or Guardian Initials	□Yes, you ma	ay take pictu	res/videos of m	y camper	\square No, do not take p	ictures/video of my cam	per
Release and Waiver of Liability and Hold Harmless Agrorogrammed activities, I agree to the following: I hereby a dependent children that might arise directly or indirectly discharge and hold harmless from any liability, losses, cat oranches and subdivisions thereof, and all employees and of Directors of the YMCA of Columbia-Willamette, except contents of this release, that I have read and understand administrators, executors, successors and assigns. I under the heavy of the summary of the summary of the provide and the summary of the provide and the provide a waiver unenforceable shall be modified or deleted to the minimulative read that the risks, I understand the Read This Agreement and Release, I understand and release will be construed broadly to provide a waiver unenforceable shall be modified or deleted to the minimulative read the summary of the release.	accept any and all as a result of, and uses of action, exp I volunteers in their for injuries caused the same, and it is erstand the risks in their expenses in the and release to the mextent necessary	responsibilit or participa enses and / r capacities d intentiona s my intentic volved in pa e, physically e event of a e injury, proy maximum e v to make th	y for, and assution in YMCA Cor claims for done as representatily or by willful on by signing the ricipation of cable to particicident or illneserty damage, in extent permissite em enforceable	me the risk of DW program amages what wives of the Y misconduct but recreived in all the regardless liness, ments appeared to the regardless liness, ments appeared to the regardless a	of any and all injury areas or activities. soever the YMCA of MCA, expressly inclustration such parties. I cele the same be bind ational activities, are program areas off of whether I have a ll or emotional traus of licable law. Any program areas off of whether I have a ll or emotional traus of the same and the same	or damage to my person I hereby expressly releft Columbia-Willamette, uding, but not limited the trify that I am familiar ing not only on me, but and I am fully aware that the tred at YMCA CDW. It is the tred at the tred a	on or case, the various o, the Boar with the tmy heirs, t there may understand se. This waive id or
Parent or Guardian Signature					Date	/ /	_
Payment Information		(All	registrations	submitted	camp is due b	ny July 1, 2019 Trequire payment in f	
A \$50 deposit is required at time of registration for							
O Check enclosed with form. Check #	a tha remaining bala	nce of [¢]	on lub.	1 7010 +0 +1	ao samo sard		
 Charge the \$50 deposit to my credit card now and charg Charge the \$50 deposit to my credit card now and charg 	_		-				
to the same card on the 1st of each month. Any paymen	ts remaining on July						
O Charge the full fee of \$ to n Name on Card							
Name on Card Signature				ito /	,		
mail Address							
O Visa O MasterCard O Discover							
Card Number	E	xp. Date	/3-[Digit CVD*			