

# Day Camp Registration Form 2012

Mail or fax registration form to: 1724 W Main Street • Lake Geneva, WI 53147

Phone: (262) 248-3600 • Fax: (262) 248-6814 • www.covenantharbor.org



## Participant Information - only one camper per form. Please print clearly in ink.

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Gender: M / F  
Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Grade (2011-12 school year): \_\_\_\_\_ School: \_\_\_\_\_

## Parent/Guardian Information - used for all correspondence, billing and emergency contact

1: Last, First, M.I. \_\_\_\_\_ E-mail: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
2: Last, First, M.I. \_\_\_\_\_ E-mail: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place of Worship (optional): \_\_\_\_\_ City, State: \_\_\_\_\_  
Denomination: \_\_\_\_\_

Team Mate Requests (optional) 1st Name: \_\_\_\_\_ 2nd Name: \_\_\_\_\_

## Day Camps Sessions Choose sessions. See brochure or website for camp fees.

**Team 13 (fall 2011 K-2 graders):**  June 25-29  July 16-20  July 30 - Aug. 3  
**Club 46 (fall 2011 3-6th graders):**  July 9-13  July 23-27  Aug. 6-10  
Optional Club 46 overnight:  July 12  July 26  Aug. 9 X \$29 each  
**Day Camp Skills 1 & 2\*:**  July 2-3 Circle One: Watersports (+\$15), Adventure (+\$10), Creative Arts, Athletics  
 July 5-6 Circle One: Watersports (+\$15), Adventure (+\$10), Creative Arts, Athletics  
**Summer Kickoff\*:**  June 18-22 **Endless Summer\*:**  Aug. 13  Aug. 14  Aug. 15  
\* For campers in K - 6th grades in fall 2011

## Calculate your Cost

Camp Fee \$ \_\_\_\_\_  
Camp Fee \$ \_\_\_\_\_  
Fee \$ \_\_\_\_\_  
Camp Fee \$ \_\_\_\_\_  
Skill Fee(s) \$ \_\_\_\_\_  
Camp Fee \$ \_\_\_\_\_  
Total Day \$ \_\_\_\_\_  
Camp Fees \_\_\_\_\_  
Discount \$ - \_\_\_\_\_  
Discount \$ - \_\_\_\_\_  
Discount \$ - \_\_\_\_\_  
Payment \_\_\_\_\_  
Enclosed \$ \_\_\_\_\_  
(minimum \$25 per session non-refundable deposit)  
Balance due \_\_\_\_\_  
by May 15 \$ \_\_\_\_\_

## Discounts See registration instructions in brochure or on website to see if you qualify.

**Early Registration Discount:** Balance of camp fee must be paid in full by May 15. Save \$10 per session\*\*.

**YMCA Membership Discount:** Save \$10 per session\*\*. Membership # \_\_\_\_\_  
Child attending camp must be part of the Geneva Lakes YMCA membership to be eligible.

**Triple Play Discount:** Register for all 3 Team 13 or Club 46 programs and save \$15 per session.\*\*

**\*\*Discounts do not apply to Day Camp Skills or Endless Summer.**

## Payment Information Check Enclosed Payable to Covenant Harbor\* (our preferred payment)

**Credit card payments must be for full camp fee.**  Visa  Discover  Master Card

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name on Card: \_\_\_\_\_ Security Code\*\* \_\_\_\_\_

Authorized Signature: **X** \_\_\_\_\_

\* A \$15 processing fee will be charged for checks returned by the bank for non-sufficient funds (NSF checks). \*\*last 3 digits on the back of your card.

No one should miss camp because it is unaffordable, call our registrar at 262-248-3600 x 327 for information about financial assistance.

**Cancellation policy** Cancellations must be received in writing. The Cancellation policy is based on when we receive written notification. More than 30 days before the first day of camp - Full refund except non-refundable deposit; 7 to 30 days before the first day of camp - All but \$50 of payments received will be refunded; Less than 7 days before the first day of camp - No refund. Medical cancellations - A full refund (minus a \$25 processing fee) will be given when doctor's verification is presented prior to the start of camp.

**Consent and Release** I hereby give my consent to have the above-named Participant fully participate in all camp activities, outings and field trips conducted on and off the campus of Covenant Harbor recognizing that there are risks known and unknown, foreseeable and unforeseeable involved in participating in these or similar activities. Covenant Harbor has taken reasonable and prudent steps to reduce known and foreseeable risks. I understand activities may be strenuous and/or outdoors and agree that participation in activities is voluntary. I understand and agree that neither Covenant Harbor nor its trustees, officers, directors, employees, agents or representatives may be held liable in any way for any injury, harm, damage or death which may occur to the above Participant as a result of participation in these activities and hereby release, save and hold harmless the above mentioned of said injury due to participation in these activities. Further, I do consent to any and all medical treatment that may be deemed necessary for the Participant should he/she require such assistance, including the ordering and administering of medications. I agree that my insurance plan is the primary plan to pay for the medical, dental or hospital care or treatment that is given to the Participant. I agree to allow Covenant Harbor to transport Participant as needed and to use a photocopy of this form as my authorization when necessary. Covenant Harbor may use the Participant's photo, films, digital images, videotapes and sound recordings in future promotional materials. I have read and voluntarily agree to the statements herein.

Signature of parent/guardian: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

