



YMCA Camp Gorham Registration

Family Camp August 25 – September 1, 2019

Name		
DOB or Member ID#		
Address		
Telephone (home)	Business phone:	
E-Mail	Y Member? Yes No Branch:	

RATES:

Accommodation	Full Week: 8/25 – 9/1/19	First Half: 8/25 – 8/29/19 Sunday - Thursday	Second Half: 8/29 – 9/1/19 Thursday - Sunday
Arrival/Departure	Check-in: 1:30 Check-out: 11:00	Check-in: 1:30 Check-out: 11:00	Check-in: 3:00 Check-out: 11:00
Single Family Cottage	Adult: \$839 Child: \$761	Adult: \$567 Child: \$514	Adult: \$457 Child: \$410
Shared Cabin	Adult: \$767 Child: \$693	Adult: \$525 Child: \$473	Adult: \$420 Child: \$378
Non-member fee	\$75.00 per person	Children ages 5-12 pay child rate; children under 5 attend at no cost. Prices include food, lodging and program fees.	

Family Information: (please provide an emergency contact on reverse side of form)

NAME: (additional family members may be listed on page 2- reverse side)	Adult	5-12 years	4 and under free	Special Diet Y/N	Full week; 1 st half or 2 nd half	Rate:
						\$
						\$
						\$
						\$
						\$
Please list total from Page 2 registrants:						\$
Number of non-members _____ x \$75 non-member fee						\$
Less non-refundable/non-transferable deposit \$200 per person						(\$)
Balance due 30 days prior to camp; balances will be auto charged to card on file.						\$

Please charge my credit card: NOTE: deposit is required to secure your registration

Credit card type	VISA	MASTERCARD	DISCOVER
Credit card number			
Expiration date	(3-digit security code):		
Authorized signature			
Please auto bill my card on July 15th:	YES	NO – I WOULD PREFER STATEMENT BILLING	

Cabin mate request: Yes No Name: _____
 I would like to receive email updates on Family camp from the Family Camp Chairperson: Yes No

- I understand that all fees are non-refundable and non-transferable; I understand the enrollment is limited and registrations will be taken on a first come, first served basis;
- I understand that I will forfeit the entire program fee should I cancel less than 30 days prior to the beginning of camp;
- I give consent that the YMCA of Greater Rochester may take photographs, slides or video tapes of as may be needed for its records or for promotional use, such as brochures, advertisements and the YMCA of Greater Rochester's websites without compensation;
- I understand that all programs and activities are subject to change based on weather and instructor availability;
- I understand that cabin mate requests cannot be guaranteed. (Camp Gorham will do its best to accommodate requests for individuals.)
- As contact person for my group, I recognize that the YMCA of Greater Rochester is not providing liability insurance and is not liable for any injury. I understand that I am responsible for the behavior and actions of my group;
- I understand if I am participating in a half week program and arrive early or depart late, I may be subject to additional fees;
- I understand meals and activities are only available for registered guests;
- Special diets: vegetarian and gluten free guests must register in advance for these meals;
- **Registration changes after 8/10: \$50 processing fee; DEADLINE for registration 8/15**

Signature: _____ Date: _____

Additional Family Members:	Adult	5-12 years	Under 4 free	Rate:
				\$
				\$
				\$
				\$
				\$
				\$
TOTAL				\$

Please be sure to include this total on page one of your registration form.
If separate billing is required, you must complete separate registration forms.

I would like to make a contribution to the Annual Campaign for Camp Scholarships. (Donations are 100% tax deductible. Visit campgorham.org/donate for more information.) Please charge my card for:	\$
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EMERGENCY CONTACT INFORMATION: in the event of an emergency our first contact will be your family members attending camp with you; in the event that they cannot be reached, please provide us with an alternative contact for your family:

Name:	
Home phone:	
Cell phone:	

Registration confirmation and directions to Camp Gorham will be sent upon receipt of full payment. Make copies of this form as necessary for additional registrations. Please return completed forms with payment to: YMCA Camp Gorham Family Camp, 265 Darts Lake Rd., Eagle Bay, NY 13331

Contact us toll free at: 888-518-5671 or Fax 315-357-3103 Visit us online at campgorham.org