

**Morris Center YMCA Summer Camp
Lunch & Snack Shack Registration Form 2011
Grades 1- 10 full day campers only**

CHILD NAME _____
Grade in Sept '11 _____

GENDER ___ AGE ___

Lunch

Lunches will be provided by Lovey's Pizzeria. A menu will be provided online and at camp for the weeks selection and **includes** juice **AND** afternoon snack from the Snack Shack. This form is due Thursday of the prior week.

(please check appropriate boxes)

Session Dates	Lunch	
JUNE 20-JUNE 24	\$35.00	<input type="checkbox"/>
JUNE 27-JULY 1	\$35.00	<input type="checkbox"/>
JULY 5 -JULY 8	\$35.00	<input type="checkbox"/>
JULY 11-JULY 15	\$35.00	<input type="checkbox"/>
JULY 18-JULY 22	\$35.00	<input type="checkbox"/>

	Lunch	
JULY 25 -JULY 29	\$35.00	<input type="checkbox"/>
AUGUST 1 - AUGUST 5	\$35.00	<input type="checkbox"/>
AUGUST 8 - AUGUST 12	\$35.00	<input type="checkbox"/>
AUGUST 15 - AUGUST 19	\$35.00	<input type="checkbox"/>

Healthy Heart Snack Shack if not purchasing Lunch ticket

Fresh, cool, healthy afternoon snacks available for weekly purchase. Juice Ice-Pops, frozen grapes, kid friendly, healthy snacks will be available. Priced per week.

Session Dates	Snack Shack	
JUNE 20-JUNE 24	\$5.00	<input type="checkbox"/>
JUNE 27-JULY 1	\$5.00	<input type="checkbox"/>
JULY 5 -JULY 8	\$5.00	<input type="checkbox"/>
JULY 11-JULY 15	\$5.00	<input type="checkbox"/>
JULY 18-JULY 22	\$5.00	<input type="checkbox"/>

	Snack Shack	
JULY 25 -JULY 29	\$5.00	<input type="checkbox"/>
AUGUST 1 - AUGUST 5	\$5.00	<input type="checkbox"/>
AUGUST 8 - AUGUST 12	\$5.00	<input type="checkbox"/>
AUGUST 15 - AUGUST 19	\$5.00	<input type="checkbox"/>

TOTAL FEES REGISTERED

- CASH
 Check # _____
 Charge # _____ Exp. Date _____

PARENT/GUARDIAN SIGNATURE _____ Date: _____

OFFICE USE ONLY

check # _____

cash \$ _____

BACKYARD KIDS SUMMER CAMP

5th and 6th Grade

Grade in
September
2011
Circle one

5th
6th

PLEASE PRINT ALL ITEMS CLEARLY

Child's Name _____

Gender _____ Age _____ Birthdate _____

EMAIL Address: _____ Home Phone _____

Street Address _____ City & Zip _____

Mother/Guardian Name _____ Cell Phone _____

Father/Guardian Name _____ Cell Phone _____

YMCA MEMBERSHIP ID # _____ TYPE _____ EXPIRATION _____

(NOTE: Camp Membership will be valid 6/20/11 - 9/20/11. This 3-month membership is \$65.
A valid Limited Youth Membership is okay.)

SESSION DATES	Fee: Sibling Discount:	5 Days \$260 <input type="checkbox"/> \$250 <input type="checkbox"/>	4 Days \$220 <input type="checkbox"/> \$210 <input type="checkbox"/>	3 Days \$165 <input type="checkbox"/> \$160 <input type="checkbox"/>	Circle Days	Early Drop Off \$35/week
JUNE 20-JUNE 24		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
JUNE 27-JULY 1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
JULY 5-JULY 8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
JULY 11 - JULY 15		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
JULY 18 - JULY 22		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
JULY 25-JULY 29		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
AUGUST 1-AUGUST 5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
AUGUST 8-AUGUST 12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>
AUGUST 15-AUGUST 19		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M T W TH F	<input type="checkbox"/>

Registered and paid in full for 2 weeks of full day camp by May 1st - Free Bag

No Online Registration Available - Mail in ONLY

TOTAL CAMP FEES \$ _____ DEPOSIT AMOUNT \$ _____
Deposit is 50% of total camp fees

CASH

CHECK Check # _____

CHARGE Charge # _____ Exp. Date _____

PARENT/GUARDIAN SIGNATURE _____

DATE _____

AFTER MAY 1ST PAYMENT IN FULL IS REQUIRED

Each camper is entitled to a free t-shirt. Additional t-shirts are \$7.00 each. SEE ORDER FORM
OFFICE USE ONLY

STAFF INITIALS _____