



CAMPER INFORMATION

NAME _____ DATE OF BIRTH _____

ADDRESS _____ CITY and PROVINCE _____ POSTAL CODE _____

GUARDIAN #1 NAME _____ CELL PHONE # _____ SECONDARY PHONE # _____

GUARDIAN #2 NAME _____ CELL PHONE # _____ SECONDARY PHONE # _____

MAIN CONTACT EMAIL _____ CABINMATE REQUEST(1 request only) _____

LEGAL CUSTODY: BOTH GUARDIANS GUARDIAN #1 GUARDIAN #2 OTHER _____

AUTHORIZED PERSON(S) FOR PICKUP AND DROP OFF: BOTH GUARDIANS GUARDIAN #1 GUARDIAN #2 OTHER _____

ALTERNATE EMERGENCY CONTACT _____ PHONE # _____ RELATIONSHIP _____

DIETARY RESTRICTIONS OR ALLERGIES: _____

OTHER MEDICAL INFORMATION: _____

HEALTH CARD: _____ **DOES YOUR CAMPER REQUIRE ADDITIONAL SUPPORT?** YES NO
If YES, you must contact the Camping Branch **BEFORE** registering and fill out the Camp Inclusion Support Form

CAMP PROGRAM SELECTIONS

OVERNIGHT CAMP SESSIONS

CABIN CHOICE: ALL GENDER CABIN GIRLS CABIN BOYS CABIN

SESSION	DATES	NON-MEMBER FEE	MEMBER FEE
Chickadees 1 (Ages 5-12)	July 4-8	<input type="checkbox"/> \$600	<input type="checkbox"/> \$550
Session 1 (Ages 6-13)	July 10-15	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Leadership Session 1 (Ages 14-16)	July 10-15	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Session 2 (Ages 6-13)	July 17-22	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Session 3 (Ages 6-13)	July 24-29	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Leadership Session 3 (Ages 14-16)	July 24-29	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Chickadees 2 (Ages 5-12)	August 1-5	<input type="checkbox"/> \$600	<input type="checkbox"/> \$550
Session 4 (Ages 6-13)	August 7-12	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680
Session 5 (Ages 6-13)	August 14-19	<input type="checkbox"/> \$750	<input type="checkbox"/> \$680

DAYCAMPSESSIONS (Ages 6-13)

	DATES	FEE
Day Camp Full Week	July 11-15	<input type="checkbox"/> \$170
	July 18-22	<input type="checkbox"/> \$170
	July 25-29	<input type="checkbox"/> \$170
	August 8-12	<input type="checkbox"/> \$170
Day Camp Short Week	August 15-19	<input type="checkbox"/> \$170
	July 5-8	<input type="checkbox"/> \$140
	August 2-5	<input type="checkbox"/> \$140
Optional Day Camp Extended Care (7:30-8:30 am and 4:30-5:30 pm)		<input type="checkbox"/> \$30 per week

PHOTO CONSENT

I understand that photographs, images or recordings containing my child's picture may be used for promotion on the YMCA website; social media, including Facebook and Twitter; and other marketing and promotional materials for the YMCA of Southwestern Ontario such as brochures, posters, mailers etc.

By checking "YES", I am granting my permission. YES NO

For in-depth information, and for online registration, visit us at:

camphenry.ca





REGISTRATION PROCEDURES

Registration begins ONLINE on February 28 at 9 am. Registrations are processed in the order they are received. If you are not able to register online, this form can be emailed to camp.henry@swo.ymca.ca

REFUNDS AND CANCELLATIONS

Please note there is a non-refundable deposit of \$100 for all overnight summer camp programs and \$50 for daycamp programs.

OVERNIGHT CAMP: Cancellations 30 days or more prior to the start of the program: A refund minus the non-refundable deposit will be granted. Less than 30 days prior: Refunds minus the non-refundable deposit will be granted for medical reasons only.

DAY CAMP: Cancellations 6 business days prior to the start of the program: A refund minus the non-refundable deposit will be granted. Less than 6 days prior: Refunds minus the non-refundable deposit will be granted for medical reasons only.

Written notice of the cancellation as well as a medical certificate must be approved by the Camp Director in order to qualify for a refund. Refunds will not be issued if the camper is removed from the camp program at the choice or request of the camper or camper's parent(s)/guardian(s), or is dismissed from camp for contravention of camp guidelines or the camp code of conduct for behaviour. The code of conduct is available in the 2022 Information Guide.

A service charge of \$30 will apply to payments declined by the chosen financial institution.

YMCA Camp Henry reserves the right to cancel programs at any time due to inadequate registration situations outside the control of the YMCA of Southwestern Ontario such as the in-operability of the site, health reasons, or other unforeseen circumstances.

COVID-19 VACCINATION POLICY AUTHORIZATION

I understand the Camp Henry COVID-19 Vaccination Policy, requiring vaccinations for all overnight campers 5 years and older, and verify that my camper will be fully vaccinated according to this policy prior to their arrival.

AUTHORIZATION

- I permit my child to participate in the full range of activities and authorize the Camp Director or their appointee, in the event of accident or illness affecting my child, to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, as they may deem essential for the care and wellbeing of the participant. Such action is to be taken only when immediate contact with the undersigned cannot be made.
- I authorize the YMCA of Southwestern Ontario to release information regarding my child to other professionals/agencies when required to assist in the development of my child.
- I understand all the risks involved in my child's participation in YMCA Camp Henry programs, and accept full liability.
- I have read, understand and accept the Refund and Cancellation policy.
- I understand that there will be COVID/health procedures in place that every participant and their family must partake in to be allowed to participate in camp programs. This will include a pre-screening before arrival, screening questions upon arrival and may also include additional requirements for participants that will be communicated ahead of the camp session. I understand that if anyone in my family shows symptoms of COVID-19 or any other communicable illness that I will be asked to delay my camper's arrival or may be unable to participate in the program.
- I understand that information collected on this form may be used for YMCA promotions, mailings, newsletters and offerings. We will not collect, use, or disclose your personal information without your consent and will not lend or sell to third parties for any purpose

Check here if you do NOT wish the YMCA of Southwestern Ontario to contact you for any reason other than those reasons relating to this application.

CODE OF CONDUCT

The safety of each individual is of the utmost importance to the YMCA. I and my child recognize a personal responsibility to learn and follow at all times safety and other rules established by YMCA staff. I and my child understand that any behaviour that places my child, or others, at risk may result in immediate dismissal from the program. I agree to assume any expense(s) arising from program dismissal. I understand no refund will be granted for dismissal or removal of my child at my or my child's request before the end of a camp session.

In order to ensure the safety and well-being of all participants, the YMCA of Southwestern Ontario reserves the right to alter the program at any time without compensation to participants, parents or guardians.

I have carefully read, understand, and accept the Refund and Cancellation policy, COVID Vaccination Policy, Authorizations, and Code of Conduct information outlined above. I am permitting my child, _____ to attend YMCA Camp Henry, operated by the YMCA of Southwestern Ontario.

Signature of Guardian _____ Date _____

1 CALCULATE PAYMENT

Are you a staff member of the YMCA of Southwestern Ontario? YES NO

CAMP FEE: _____
PLUS 13% HST: _____
DONATION TO SUPPORT CAMP _____
TOTAL: _____

2 CHOOSE METHOD

- A. FULL PAYMENT
- B. EXTENDED PAYMENT
- Deposit upon registration,
 - 50% of balance on April 1, 2022
 - 50% of balance on June 1, 2022
- C. APPLYING FOR FINANCIAL ASSISTANCE - please attach Financial Assistance Application

3 CHOOSE MODE

- AUTOMATIC WITHDRAWAL
Attach a void cheque if you would like to pay by automatic withdrawal
- CREDIT CARD
Contact the Camping Branch at 519-453-8858 to provide your credit card information