



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

BE ADVENTUROUS THIS SUMMER

Summer Adventure YMCA SCHOOL AGE SERVICES MAURY COUNTY FAMILY YMCA

Join us this summer for a variety of classic summer adventures. Enjoy theme based activities, crafts, science, sports, field trips, friendships, and so much more!

Ages served: 5-12yrs (having completed Kindergarten)

YMCA Summer Adventure is licensed by the Tennessee Department of Human Services.



Whitney Morris
P 615-256-9622 Ext. 71219
205 North Thompson Lane
Murfreesboro, TN 37129
wmorris@ymcamidtn.org

Our Mission: A worldwide charitable fellowship united by a common loyalty to Jesus Christ for the purpose of helping people grow in spirit, mind and body.

MAURY CO. FAMILY YMCA REGISTRATION FORM

Please Print Family Information:

Child Name: _____ Birth date: ____/____/____

Home Address: _____ City: _____ State: _____ ZIP: _____

MALE FEMALE Age on May 29th, 2012 _____ Grade in the fall of 2012 _____

Educational Program: Regular Education Special Education* Inclusion* Resource*

*You will be contacted to discuss any special assistance your child may require prior to starting.

T-Shirt size preference: YS YM YL AS AM AL AXL

* Children who **pre-register by April 13th** will receive t-shirt size selected above

Parent Primary Email for Camp Updates: _____

Parent/Guardian Name: _____ Birthdate: ____/____/____

Employer _____ Work Phone _____ Email _____

Parent/Guardian Name _____ Birthdate: ____/____/____

Employer _____ Work Phone _____ Email _____

Registration Fees and Options: \$38 Registration fee per child (non-refundable) \$80 Weekly fee per child*

Please select one school site: *Please review our cancellation policy and potential related fees noted below.

RANDOPH HOWELL ELEMENTARY 653 Bear Creek Pike Columbia, TN 38401 931.619.2415

MCDOWELL ELEMENTARY 714 West 7th street Columbia, TN 38401 931.797.4227

*Maury County Fun Company reserves the right to close summer locations that do not have 60 enrolled participants.

Select the weeks your child will be attending the Maury Co. YMCA Summer Adventure:

Week 1 – May 29-June 1 *CLOSED on Monday, May 28th for Memorial Day

Week 5 – June 25-29

WEEK 9 - July 23-27

Week 2 – June 4-8

Week 6 – July 2-6 *CLOSED on Wednesday, July 4th for Independence Day

NO CAMP – July 30 or July 31

Week 3 – June 11-15

Week 7 – July 9-13

Week 4 – June 18-22

Week 8 – July 16-20

****Please note that Maury County schools resume on Wednesday, August 1, 2012 for a ½ of school.** The YMCA Fun Co. will resume child care on this date as well. Fun Co. will be closed Monday July 30th and Tuesday, July 31st for tear down from summer and set up/training for the 2012-2013 school year.

Parental Consent Form (please initial)

____ I wish to apply for financial assistance from the YMCA

*Attach paperwork to this application

____ I participate with DHS Child Care Certificate Program

*Please attach the current certificate

Permission Statement (please initial)

____ I give permission for my child to participate in all activities planned and conducted by the YMCA summer programs, including bus transportation to and from field trips.

____ I understand that the YMCA provides the required DHS medical insurance and that this requirement does not imply or admit guilt or liability of the YMCA.

____ I understand that in the event the insurance company denies a claim, the parent/guardian is responsible for payment of medical care.

____ I understand it is my responsibility to submit a current DHS certificate.

____ I understand that financial assistance is limited and I must apply for assistance for the summer program regardless of my current status. I am responsible for full amounts until assistance has been approved. The YMCA is unable to make assistance retroactive.

____ I understand that I am responsible for payment of all weeks reserved.

____ I understand that I have **until Friday, May 4, 2012 to make written changes** (including cancellation of weeks) to my child's attendance without financial penalty.

____ I understand that **after Friday, May 4, 2012** I will be required to pay a **cancellation fee of \$20 per child, per week** for cancellation/non attendance of reserved weeks.

____ I have read and agree to the cancellation policy noted above.

Parent/Guardian Signature

Date

Office Use Only: Registration fee pd \$ _____ Ck# _____ Date ____/____/____ Confirmation Sent ____/____/____ by _____
Fee information: Weekly Fee: \$ _____ Financial Assistance % _____ DHS _____ Staff % _____ Weekly Fee due \$ _____
Sent to Ops ____/____/____ by _____ Entered into Spreadsheet on ____/____/____ by _____ Other: _____