



# OLD COLONY YMCA SUMMER CAMP MODIFICATION FORM

Child's Name \_\_\_\_\_ D.O.B \_\_\_\_\_

Date Submitted \_\_\_\_\_ Please select one of the following options:

**Change in session(s) enrolled**

Session in which child is enrolled and will need to change: 1 2 3 4 5 6 7 8 9 10

Change to session: 1 2 3 4 5 6 7 8 9 10

Please note there is a 2 week notice required to make this change

Effective Date of Change: \_\_\_/\_\_\_/\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Additional Services requested**

Early Care (7:00am-8:45am): Add to session 1 2 3 4 5 6 7 8 9 10

Extended Care (4:00pm- 6:00pm): Add to session 1 2 3 4 5 6 7 8 9 10

Fees Per Week: \$60 for just AM or PM Care and \$90 for both AM and PM combined

**Total Fees due: \_\_\_\_\_ (must be paid in full)**

Check Cash (Please attach to form)

Credit Card # \_\_\_\_\_ Exp date: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Cancellation of services**

Session(s) to cancel: 1 2 3 4 5 6 7 8 9 10

Please note all deposits are non-refundable when cancelling.

Please explain the reason for the cancellation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Effective Date of Change: \_\_\_/\_\_\_/\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_