WHY THE Y?
Registered Nurse & Lifeguards
CPR & First Aid Certified staff
Integrated approach to youth development focusing on: Mental Health, Youth Programs, Mentoring, Family Programs, and Health & Wellness
We conduct Criminal Offender Record Information (CORI) and Sexual Offender Registry Information (SORI) checks prior to all staffs employment
This camp must comply with regulations of the Massachusetts Department of Public Health and be licensed by the local board of health. Per Massachusetts law, parents may at any time request copies of background check, health care and discipline policies as well as procedures for filing grievances by contacting our camp office.

WHAT’S INCLUDED?
Recreation Swim Time
Archery
Science
Arts & Crafts
Sports and Team Building
Library
FREE Camp Lunch

WHEN IS CAMP?
HOURS: 9am–4pm
AM Care: 8am–9am ($)  
PM Care: 4pm–5pm ($)  
Week 1: 6/21–6/25
Week 2: 6/28–7/2
Week 3: 7/5–7/9
Week 4: 7/12–7/16
Week 5: 7/19–7/23
Week 6: 7/26–7/30
Week 7: 8/2–8/6
Week 8: 8/9–8/13
Week 9: 8/16–8/20
Week 10: 8/23–8/27
Transportation*: $50 per week  
("if available")

Financial assistance available, ask today!
**Camper's Full Name (First, Last):** _______________________________________________________________________________________________________________________________________________

**Age:** __________  

**Grade:** __________  

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**CLEARLY PLACE AN “X” OR CIRCLE IN THE APPROPRIATE BOX TO INDICATE YOUR CAMP SELECTIONS**

### CAMP '21

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<tbody>
<tr>
<td>YOUTH DEVELOPMENT CAMPS</td>
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<td>Chipmunk Full Day</td>
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<td>Leader in Training</td>
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<td>15</td>
<td>$385 member/$410 non-member</td>
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<td>$385 member/$410 non-member</td>
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<td>N/A</td>
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<td>Camp Lunch</td>
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**SAVINGS**

- **20% OFF**  
  **ENDS APRIL 30TH**
  Purchase 4 weeks of camp and receive 20% off each additional week. Must be paid in full (per child)

- **$15 OFF**  
  **SIBLING DISCOUNT**  
  per week, per additional child. Must be the same week of camp. Excludes week 1.

- **REFER A CAMPER**
  Refer a new camper for 2 sessions or more and receive $50 in Y-Bucks

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**<PLEASE NOTE THAT OUR PRIMARY METHOD OF COMMUNICATION IS VIA EMAIL>**

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**CAMPER AND FAMILY INFORMATION**

**Camper’s Full Name (First, Last):** _______________________________________________________________________________________________________________________________________________

**Date of Birth:** ___ / ___ / ______

**Age:** ____  

**Male ____ Female ____**  

**Address:** ________________________________________________________________________________________________________________________________  

**City:** __________________________  

**Zip Code:** _______________________

**<PREFERRED COMMUNICATION>**  

**Phone:** __________________________  

**Email:** ____________________________________________________________________________________________________________

**Parent/Guardian 1 Name:** ________________________________________________________________________________________________________________________  

**DOB:** ___ / ___ / ______  

**Cell:** ____________________________

**Relationship to Camper:** ____________________________  

**Email:** ____________________________________________________________________________________________________________  

**Work:** ____________________________

**Parent/Guardian 2 Name:** ________________________________________________________________________________________________________________________  

**DOB:** ___ / ___ / ______  

**Cell:** ____________________________

**Relationship to Camper:** ____________________________  

**Email:** ____________________________________________________________________________________________________________  

**Work:** ____________________________

**Referring a Camper? Camper’s Full Name:** ___________________________________________________________________________  

**Email:** ____________________________________________________________________________________________________________

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**AFTER COMPLETING THE FORM; PLEASE PRINT/SCAN, AND SUBMIT TO OUR CAMP STAFF VIA EMAIL.**

Camp Director • Catherine Colantuone • CColantuone@oldcolonyymca.org • 508-888-2290 x204