



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

DeVos-Blum Family YMCA | YMCASPBC.ORG | 561-738-9622  
**Fun Day Registration 2024-2025 (Please circle all that apply)**

Aug. 20<sup>h</sup> / Oct. 3<sup>rd</sup> / Oct. 14<sup>th</sup> / Nov. 5<sup>th</sup> / Nov. 25<sup>th</sup> / Nov. 26<sup>th</sup> / Nov. 27<sup>th</sup> / Jan. 2<sup>nd</sup>  
Jan. 3<sup>rd</sup> / Jan. 6<sup>th</sup> / Jan. 20<sup>th</sup> / Feb. 24<sup>th</sup> / Mar. 31<sup>st</sup>

**Winter Break Dec. Dec. 23, 26, 27, 30 \$200/\$300**

**Spring Break March 24<sup>th</sup> - 28<sup>th</sup> \$220/\$320**

**Parents/Guardians:** These forms are extremely **IMPORTANT!** They provide the camp staff with information about your child that will help us get to know him/her quicker and treat him/her with greater care and effectiveness. These forms are confidential and will only be viewed by camp administration and your child's counselors

**A. Child Information**

Child's Name (First & Last) \_\_\_\_\_ Nickname \_\_\_\_\_ Date of Birth \_\_\_\_\_

Gender Male/Female Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Skin Color \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Identifying Marks \_\_\_\_\_

Child Lives Primarily With Mother/Father/Both \_\_\_\_\_ Adopted Yes/No \_\_\_\_\_ Legal Custody Mother/Father \_\_\_\_\_

➤ Health Conditions (Circle all that apply) ADD/ADHD ASTHMA DIABETIC SEIZURES

➤ Medications \_\_\_\_\_ Allergies \_\_\_\_\_

IEP YES/NO

➤ Treatment Information \_\_\_\_\_

➤ **Other (Behavior/Physical/Emotional/Mental) Health:** Please provide us with any additional information about your child's well-being that our staff should be aware of in order to create a supportive environment for every camper. Any additional health information may be listed here also.

**B. Parent Information**

Parent/Guardian Name (First & Last) \_\_\_\_\_

Parent/Guardian Name (First & Last) \_\_\_\_\_

Primary Home Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_

Cell # \_\_\_\_\_ Home/Work # \_\_\_\_\_

E-mail Address \_\_\_\_\_

**C. Emergency Contacts & Authorized Pick-Up List (MUST PROVIDE PHOTO ID UPON SIGN-OUT)**

Persons other than the Parent/Guardian Listed above to whom the camper may be released and/or contacted in case of an emergency (in the order below).

NOTE: In order to deny parental access to a child, the YMCA must have a copy of a court order stating that access is specifically denied, verbally or physically.

1. Name \_\_\_\_\_  
Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_  
Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

**E. Payment Information ELC: Yes / No**

Name on Card \_\_\_\_\_ Last 4 \_\_\_\_\_ Exp. Date \_\_\_\_\_ VISA/MASTERCARD/DISCOVER/AMEX

By signing below I agree to pay the total amount according to the issuer agreement. If not paying in full, I agree to have payments scheduled automatically to the above card. I agree to give a **72 HOUR NOTICE IF MY CHILD WILL NOT ATTEND, IF NOT THERE IS NO REFUND OR CREDIT. \$25 REGISTRATION FEE AND \$10 DEPOSITS ARE NON- REFUNDABLE.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**F. Release and Waiver of Liability and Indemnity Agreement**

In consideration for being permitted to utilize the facilities, services, and programs of the YMCA of South Palm Beach County for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representative, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation. IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1)THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, agents, and volunteers (hereinafter collectively referred to as "YMCA") from all liability to the undersigned, his personal representatives assigns, heirs, and next of kin for any loss or damage, and any and all claims or demands therefore on account of injury to the person or property or resulting in death to the undersign, whether caused by the active or passive negligence for the YMCA

2)THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the YMCA and each of them from any and all claims for loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities of the YMCA or participating in any program affiliated with the YMCA whether caused by the active or passive negligence of the YMCA or otherwise, including gross negligence of the YMCA.

3)THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR DAMAGES OF ANY KIND INCLUDING, BUT NOT LIMITED TO: RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE allegedly attributed to the active or passive negligence of the YMCA or otherwise, including gross negligence of the YMCA, while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program or activity or activity affiliated with the YMCA

4)THE UNDERSIGNED HEREBY gives permission to the YMCA, without obligation, to take and use any photographs film footage, video tape recordings which may include the undersigned or any member of the undersigned's family's image or voice for purposes of promoting or interpreting YMCA programs.

THE UNDERIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the state of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. The undersigned understands that his waiver includes any and all claims based on negligence, action or inaction of the YMCA, including gross negligence of the YMCA.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_