



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY



**2020 SUMMER CAMP GUIDE/REGISTRATION**  
**YMCA CAPE COD – [WWW.YMCACAPECOD.ORG](http://WWW.YMCACAPECOD.ORG)**  
**508-362-6500**

**CAMP  
LYNDON**

**CAMP WEST  
BARNSTABLE**

**CAMP  
FALMOUTH**

**CAMP  
HARWICH**

# MULTIPLE SUMMER CAMP LOCATIONS, CONVENIENT FOR YOU!



## CAMP LYNDON

117 Stowe Road  
Sandwich, MA 02563

**HOURS: 9:00AM-4:00PM**

Camp Lyndon, located on 79 acres on Lawrence Pond, provides quality traditional day camping experiences.

We offer extended care from 7:30-9:00am and 4:00-5:30pm for an additional fee

**SEE PAGE 3  
FOR MORE DETAILS!**



## CAMP WEST BARNSTABLE

2245 Iyannough Road  
W. Barnstable, MA 02668

**HOURS: 9:00AM-4:00PM**

Camp West Barnstable, the YMCA Cape Cod's on-site camp, provides week long themed camps.

**LUNCH INCLUDED!**

We offer extended care from 7:30-9:00am and 4:00-5:30pm for an additional fee.

**Extend Your Summer!**  
Sign up for Camp Lyndon today!

**SEE PAGE 8  
FOR MORE DETAILS!**



## CAMP FALMOUTH

62 Old Main Road  
N. Falmouth, MA 02556

**HOURS: 7:00AM-5:30PM**

Falmouth Summer Camp you choose from a quality traditional "on-site" day camping experience or choose to go on one or several exciting day trips scheduled.

**FIELD TRIPS INCLUDED!**

**Extend Your Summer!**  
Sign up for Camp Lyndon today!

**SEE PAGE 10  
FOR MORE DETAILS!**



## CAMP HARWICH

263 South St,  
Harwich, MA 02645

**HOURS: 9:00AM-4:00PM**

Located at Harwich Elementary, is an on-site camp that provides week long theme camps which include daily snacks and weekly trips off campus.

**NEW THIS YEAR!**

We offer extended care from 7:30-9:00am and 4:00-5:30pm for an additional fee.

**Extend Your Summer!**  
Sign up for Camp Lyndon today!

**SEE PAGE 12  
FOR MORE DETAILS!**

WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5	WEEK 6	WEEK 7	WEEK 8	WEEK 9	WEEK 10
6/22-6/26	6/29 - 7/3	7/6 - 7/10	7/13 - 7/17	7/20 - 7/24	7/27 - 7/31	8/3 - 8/7	8/10 - 8/14	8/17 - 8/21	8/24 - 8/28

Please note, the brochure is color coded based on the camp. Below indicates which camps run which weeks.

CL WB CH	CL WB CF CH	CL WB CF CH	CL WB CF CH	CL WB CF CH	CL WB CF CH	CL WB CF CH	CL WB	CL WB	CL
Superhero Explore camp and find your superhero power	Prehistoric Discover your inner cave dweller	World Cup & Olympics Complete in various sports and reach for GOLD	Disney Tarzan! Swinging from a rubber band	Spirit All units compete to show off their best camp spirit	Harry Potter Compete for the YMCA House Cup	Woodstock Sports, Drama, and Rock & Roll	Star Wars Let the force be with you	Holiday Celebrating holidays around the world	Pirate Be the very best Captain Hook there ever was

This camp must comply with regulations of the Massachusetts Department of Public Health and be licensed by the local board of health.

# CAMP LYNDON



## CAMP ACTIVITIES

Every day will be broken into activity categories where the campers will experience new ways to expand their comfort zones.

**ROPES** | Campers will get the opportunity to participate in a number of high/low elements as well as group activities to promote team work and leadership skills.

**OUTDOOR ADVENTURE** | Campers will have the opportunity to learn outdoor living skills such as fire safety, shelter building, as well as age appropriate environmental education.

**BOATING** | Campers can safely learn kayaking and other boating skills.

**SWIMMING / SWIM LESSONS** | Campers will get the opportunity each day to cool down with a combination lesson and free swim period under the supervision of our certified lifeguards.

**ARCHERY** | Take aim in this traditional camp activity in a safe environment.

**SPORTS** | Camp Lyndon has many places to play and the sky is the limit. From traditional ball sports, field games, court games, and more.

**CREATIVE ARTS** | Campers can express their creative side through arts and crafts, music, drama, and literacy.

**FAMILY FUN NIGHTS** | Come join fellow campers, their families and our amazing staff for a BBQ dinner, boating, archery, swimming and camp songs around a fire! S'mores anyone? Offered FREE of charge!

**CAMPER OVERNIGHTS** | Offered to campers ages 9 and up, kids get the chance to spend the night at camp in our cabin bunk houses. Extended program activities, dinner and breakfast and lunch the next day are included. There is an extra charge for each overnight and sign up forms are required.

### WAY IN THE WOODS | 5-6 YEARS\*

Camp Lyndon fosters a fun and safe summer learning environment for campers of all ages. "Woodsies" will participate in camp activities such as sports, archery, boating, and ropes, that emphasize participation, teamwork, sportsmanship, and FUN!

**\*All campers must have completed kindergarten, ask about enrolling your child in Early Education!**

### UNIT 1 – EXPLORERS | 7-8 YEARS

Explore the YMCA's Core Values of Honesty, Caring, Respect, and Responsibility. Each week campers will set and achieve new goals, develop confidence, and make friends along the way!

### UNIT 2 – PIONEERS | 9-10 YEARS

Campers will step outside the box and expand their comfort zones through camp activities that foster creativity and imagination! Campers will join in activities that build community and create positive, life-long memories.

### UNIT 3 – VOYAGERS | 11-12 YEARS

Campers develop a sense of community through team building, as well as personal and team challenges. Campers have the opportunity to select special interest activities, enhancing their day at camp!

### CHALLENGE CAMP | 13-14 YEARS

Campers will have the opportunity to "disconnect" and appreciate an active outdoor lifestyle. While enjoying traditional camp activities, campers will also learn what it takes to become role models at camp, at school, and in their community.

### COUNSELOR ACADEMY | 15-16 YEARS

This counselor in training program will prepare teens for employment and beyond. Campers will also learn what it takes to become role models at camp, school, and in their community. Upon successful completion of the four week Academy, teens will earn the following certifications: CPR, First Aid, Food Safety, Life Guarding, and Oxygen AED.

# CAMP LYNDON



## SPECIALTY CAMPS

(OFFERED WEEKS 3-8)

Our specialty camps give campers fun and interactive experiences in a chosen area. These camps are designed for campers who are looking for a more in depth focus on a certain area, whether they are looking to try an activity for the first time or build upon a current passion. Led by specialized staff and area experts, campers work on their specialty for half the day, then participate in traditional camp activities.

**LIMITED SPACES AVAILABLE IN ALL SPECIALTY CAMPS.**

\*Horseback Riding is not a half day; program will be 1 hour and 15 minutes.



1 HOUR 15 MINUTE PROGRAM

**HORSEBACK RIDING\***  
(AGES 5-6 & 7-10 & 11-14)  
OFFERED ALL 10 WEEKS!

Come learn the skills you need to safely handle and ride horses. We have horses and trainers for all skill levels, from those who want to try it for the first time to equestrians who are looking to advance their skills. We teach both hunt and stock seat.

Ages 5-6 | Member \$355 Non-Member \$460  
Ages 7-10 | Member \$320 Non-Member \$425  
Ages 11-14 | Member \$320 Non-Member \$425



**PADDLE BOARDING**  
(AGES 7-14)

Learn the basics of stand-up paddle boarding, or improve upon your skills. All equipment included. No experience necessary.

Member \$275  
Non-Member \$380



**SAILING**  
(AGES 7-14)

Come sail away! This program is designed to teach the basics of sailing. No experience necessary.

Member \$295  
Non-Member \$400

# CAMP LYNDON



## COUNSELOR ACADEMY (AGES 15–16)

Counselor Academy prepares students to become positive agents in life threatening situations. Campers will become knowledgeable and practiced in the important life savings skills of CPR, First Aid, Food Safety, Life Guarding, and Oxygen AED. They will earn certifications upon successful completion of the four week academy. Campers will spend this four week intensive learning from professionals while also participating traditional camp activities. The Academy prepares teens for employment at camps and elsewhere, and will be better prepared to be role models at camp, school and in their community.



**CPR & FIRST AID**



**FOOD SAFETY**



**LIFE GUARDING**



**OXYGEN AED**

## LUNCH PROGRAM (\$20 A WEEK)

Camp Lyndon proudly offers a lunch program for your camper for the additional cost of \$20 a week. The menu is created by a nutritionist who ensures that each lunch comes with a serving of fruit and vegetables, a lean protein, a serving of whole grains and milk. By enrolling your camper in the lunch program, you can be sure that your camper is getting the nutrients they need to fuel their fun filled day!

We are also able to make dietary accommodations for food allergies. Although all our meals are prepared in the same kitchen we take special precautions while preparing to reduce the risk of cross contamination. **If there is a need for dietary accommodations or if you need financial assistance for the lunch program, contact the Food Service Coordinator at 508-362-6500 X142.**

### SAMPLE MENU

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Barbeque Chicken Sandwich on a Whole Grain Bun with Sliced Cucumbers, Apple and Milk

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Turkey and Cheese Sandwich with Lettuce on Whole Grain Bread, Orange and Milk

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Meatball Sub on a Whole Grain Roll with Baby Carrots, Peaches, and Milk

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Hummus and Crackers with String Cheese, Sliced Cucumber, Banana, and Milk

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Chicken Caesar Wrap with Lettuce on a Whole Grain Wrap, Pineapple, and Milk

# REGISTRATION – CAMP LYNDON

FINANCIAL ASSISTANCE AVAILABLE – Contact Finance Associate at 508-362-6500 x113

Campers Full Name (First/Last): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_ \*All campers must have completed kindergarten, ask about enrolling your child in Early Education!

## PLEASE CHECK OFF DESIRED WEEKS OF CAMP

2020		Fees Dates	WK 1	WK 2	WK 3	WK 4	WK 5	WK 6	WK 7	WK 8	WK 9	WK 10	TOTAL
CAMPS	AGE	M= Member N= Non-Member	6/22- 6/26	6/29 7/3	7/6- 7/10	7/13- 7/17	7/20- 7/24	7/27- 7/31	8/3- 8/7	8/10- 8/14	8/17- 8/21	8/24- 8/28	
Way in the Woods	5-6	M \$280 N \$385											
Unit I-Explorers	7-8	M \$245 N \$350											
Unit II- Pioneers	9-10	M \$245 N \$350											
Unit III-Voyagers	11-12	M \$245 N \$350											
Challenge Camp	13-14	M \$245 N \$350											
Counselor Academy	15-16	M \$600 N \$1020											
Sailing	7-10	M \$295 N \$400											
Sailing	11-14	M \$295 N \$400											
Paddle Boarding	7-10	M \$275 N \$380											
Paddle Boarding	11-14	M \$275 N \$380											
Horseback Riding	5-6	M \$355 N \$460											
Horseback Riding	7-10	M \$320 N \$425											
Horseback Riding	11-14	M \$320 N \$425											
<b>EXTENDED CARE</b>		<b>FEES</b>											<b>TOTAL</b>
AM   7:30 - 9:00		\$31/week											
PM   4:00 - 5:30		\$31/week											
AM & PM Care		\$52/week											
<b>LUNCH PROGRAM</b>		<b>FEES</b>											
Lunch Program		\$20/week											
REGISTRATION FEE		\$25 (one time fee)											
ADDITIONAL CHILDREN		Each additional child will receive a \$15 off per week off total tuition											-
<b>PAYMENT INFORMATION</b>												<b>TOTAL AMOUNT DUE:</b>	

Financial aid available for families who need tuition assistance.

Contact Finance Associate at 508-362-6500 x113 or visit us online to download our form.

**BALANCE DUE AT TIME OF REGISTRATION** (One time \$25 registration fee + \$25 per week attending required): \$ \_\_\_\_\_

The \$25 weekly deposit will be applied towards weekly tuition.

**WEEKLY TUITION FEES MUST BE PAID IN FULL BY 5PM THE WEDNESDAY PRIOR TO THE WEEK OF YOUR CAMPER'S SCHEDULED ATTENDANCE.**

Make checks payable to:  
YMCA Cape Cod

Charge \$ \_\_\_\_\_ to the following credit card: \_\_\_\_ Mastercard \_\_\_\_ Visa

Card number: \_\_\_\_\_ Exp: \_\_\_\_\_

Print name of card holder: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

**CONTINUE TO PAGE 15**



# CAMP WEST BARNSTABLE

## CAMP ACTIVITIES

We offer a taste of everything at West Barnstable Day Camp. Our summer is built of camps offering a new experience each week, with focuses on STEM, cultural appreciation, and the arts.

Today, day camp is more vital than ever. To deliver on the Y's commitment to nurture the potential of every child and teen, day camp programs now more intentionally foster achievement, relationships, and belonging. Achievement, relationships, and belonging are essential dimensions of well-being that the Y can cultivate through day camp:

- **ACHIEVEMENT | Discovering skills.** Campers experience achievement when they try different activities, learn what they like, and discover what they are good at.
- **RELATIONSHIPS | Building friendships.** Campers have the opportunity to form healthy relationships with other children, caring adults, and role models, which helps them feel good about themselves and learn to get along with others.
- **BELONGING | Finding a place to belong.** Campers connect through significant camp traditions and rituals that create a sense of belonging, so they feel included, accepted, and part of a community.

### SWIMMING

All campers have daily swim lessons Monday through Thursday, and free-swim on Fridays.

### DAILY ACTIVITIES

Each week campers will have different activities based on that week's camp theme. However, all camps will include art, STEM, nature, and high energy games throughout the week.

### FIELD TRIPS

Campers will have trips to different places in order to enrich their experience.

#### UNIT 1 - CHIPMUNKS | 5-6 YEARS\* CAMPER TO COUNSELOR RATIO 5:1

Through daily experiences and activities, Unit 1 encourages campers to accept and demonstrate caring, honesty, respect, and responsibility in everything they do. These experiences will include songs, skits, arts and crafts, instructional and recreational swims, and nature skills, just to name a few.

**\*All campers must have completed kindergarten, ask about enrolling your child in Early Education!**

#### UNIT 2 - CUBS | 7-10 YEARS CAMPER TO COUNSELOR RATIO 10:1

Unit 2 takes our camp program a step further by spending more time in a wider range of camp activities. Campers are encouraged to set new physical and learning goals and to explore new abilities and qualities in themselves.

**UNIT 3 - FALCONS | 11-13 YEARS  
CAMPER TO COUNSELOR RATIO 10:1**  
Unit 3 develops a sense of community, teamwork, and ownership through individual and team challenges. Through these efforts we hope to provide a solid footing for the pre-teen years ahead. We give campers the opportunity to select special interest activities and encourage them to learn and demonstrate specific program-related skills.



# REGISTRATION – CAMP WEST BARNSTABLE

FINANCIAL ASSISTANCE AVAILABLE – Contact Finance Associate at 508-362-6500 x113

Campers Full Name (First/Last): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_ \*All campers must have completed kindergarten, ask about enrolling your child in Early Education!

## PLEASE CHECK OFF DESIRED WEEKS OF CAMP

2020	All fees listed are per week	WK 1	WK 2	WK 3	WK 4	WK 5	WK 6	WK 7	WK 8	WK 9	TOTAL
<b>CAMPS</b>	Fees M= Member N= Non-Member	6/22- 6/26	6/29 -7/3	7/6- 7/10	7/13- 7/17	7/20- 7/24	7/27- 7/31	8/3- 8/7	8/10- 8/14	8/17- 8/21	
Unit 1 – Chipmunks 5-6yrs	M \$280 N \$385										
Unit 2 – Cubs 7-10yrs	M \$245 N \$350										
Unit 3 – Falcons 11-13yrs	M \$245 N \$350										
<b>EXTENDED CARE</b>	<b>FEES</b>										<b>TOTAL</b>
AM   7:30 – 9:00	\$31/week										
PM   4:00 – 5:30	\$31/week										
AM & PM Care	\$52/week										
<b>LUNCH PROGRAM</b>	<b>FEES</b>										<b>TOTAL</b>
Lunch	\$20/week										
REGISTRATION FEE	\$25 (one time fee)										
ADDITIONAL CHILDREN	EACH ADDITIONAL CHILD WILL RECEIVE A \$15 OFF PER WEEK OFF TOTAL TUITION										-
<b>PAYMENT INFORMATION</b>											<b>TOTAL AMOUNT DUE:</b>

Financial aid available for families who need tuition assistance.

Contact Finance Associate at 508-362-6500 x113 or visit us online to download our form.

**BALANCE DUE AT TIME OF REGISTRATION** (One time \$25 registration fee + \$25 per week attending required): \$\_\_\_\_\_

The \$25 weekly deposit will be applied towards weekly tuition.

**WEEKLY TUITION FEES MUST BE PAID IN FULL BY 5PM THE WEDNESDAY PRIOR TO THE WEEK OF YOUR CAMPER'S SCHEDULED ATTENDANCE.**

Make checks payable to:  
YMCA Cape Cod

Charge \$\_\_\_\_\_ to the following credit card: \_\_\_\_ Mastercard \_\_\_\_ Visa

Card number: \_\_\_\_\_ Exp: \_\_\_\_\_

Print name of card holder: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

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# CAMP FALMOUTH



## CAMP ACTIVITIES

Program will be held at North Falmouth Elementary School and will include daily options of either our Trip Camp or Traditional "on-site" Camp option.

### TRADITIONAL "ON-SITE" CAMP

Summer camp experience enriched in STEM projects, art, music, and crafts inspired by the theme of the week. Surprise specialty camps of vendors on Mondays or Fridays! A great place to make friends and lifelong memories.

### THEME WEEKS

Theme weeks and special events will be planned throughout the Summer as well!

#### SAMPLE "ON-SITE" DAILY SCHEDULE (SUBJECT TO CHANGE)

Time	Ages 5-6	Ages 7-9	Ages 10-12
7:00-9:00	Arrival/Free Play		
7:30-9:00	Breakfast Offered		
9:00	Morning Meeting		
9:15	Sports	Music/Drama	STEM
10:00	STEM	Sports	Music/Drama
10:45	Music/Drama	STEM	Sports
11:30	Lunch		
12:15	Special Event		
1:00	Water Play	Team Building Games	Crafts
1:45	Crafts	Water Play	Team Building Games
2:30	Snack Time		
3:15	Team Building Games	Crafts	Water Play
4:00-5:30	Dismissal/Free Play		

### UNIT 1 - HERRING | 5-6 YEARS\*

#### CAMPER TO COUNSELOR RATIO 5:1

Fun activities to develop skills and boost self-esteem through outdoor games, water play, team games, song, and crafts. Develop new skills, explore new activities and form new friendships in a fun positive environment.

**\*All campers must have completed kindergarten, ask about enrolling your child in Early Education!**

### UNIT 2 - STRIPERS | 7-9 YEARS

#### CAMPER TO COUNSELOR RATIO 10:1

Develop confidence through both personal and team challenge. Explore new abilities and achieve goals through an exciting combination of arts, crafts, STEM, outdoor education and sports. Build friendships in a caring community.

### UNIT 3 - SHARKS | 10-13 YEARS

#### CAMPER TO COUNSELOR RATIO 10:1

Fun team building activities and challenges, STEM projects, sports, and outdoor exploration. Fostering friendship, creativity, leadership, and community. Through these efforts we hope to provide a solid footing for the pre-teen years ahead.









# REGISTRATION – CAMP FALMOUTH

FINANCIAL ASSISTANCE AVAILABLE – Contact Finance Associate at 508-362-6500 x148

Campers Full Name (First/Last): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*All campers must have completed kindergarten, ask about enrolling your child in Early Education!

Please mark an "X" for camp days you would like to attend			
Week	Theme	Date	Attending
Week #1	Super Hero	22-Jun	
		23-Jun	
		24-Jun	
		25-Jun	
		26-Jun	
Week #2	Prehistoric 	29-Jun	
		30-Jun	
		1-Jul	
		2-Jul	
		3-Jul	
Week #3	World Cup & Olympics 	6-Jul	
		7-Jul	
		8-Jul	
		9-Jul	
		10-Jul	
Week #4	Disney 	13-Jul	
		14-Jul	
		15-Jul	
		16-Jul	
		17-Jul	
Week #5	Spirit 	20-Jul	
		21-Jul	
		22-Jul	
		23-Jul	
		24-Jul	
Week #6	Harry Potter 	27-Jul	
		28-Jul	
		29-Jul	
		30-Jul	
		31-Jul	
Week #7	Woodstock 	3-Aug	
		4-Aug	
		5-Aug	
		6-Aug	
		7-Aug	

## PRICING INFORMATION

### 1st Child

Ages 5-6.... \$53/day

Ages 7-13.. \$50/day

### Additional Children

Ages 5-6.... \$50/day

Ages 7-13.. \$47/day

Complimentary camper t-shirts for travelers which must be worn on all trips.

Daily breakfast option and afternoon snacks are included!

**Financial aid available for families who need tuition assistance.**

**Contact Finance Associate at 508-362-6500 x148 or visit us online to download our form.**

**All trips are subject to change. Any trips marked with \* are planned but tentative.**

Join us at Camp Lyndon to extend your 2020 summer experience! See page 6 for more information.

**BALANCE DUE AT TIME OF REGISTRATION** (One time \$25 registration fee + \$25 per week attending required): \$ \_\_\_\_\_

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**WEEKLY TUITION FEES MUST BE PAID IN FULL BY 5PM THE WEDNESDAY PRIOR TO THE WEEK OF YOUR CAMPER'S SCHEDULED ATTENDANCE.**

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# CAMP HARWICH

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We offer a taste of everything at Harwich Day Camp. Our summer is built of camps offering a new experience each week, with focuses on STEM, cultural appreciation, and the arts.

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### UNIT 3 - FALCONS | 11-13 YEARS CAMPER TO COUNSELOR RATIO 10:1

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# REGISTRATION – CAMP HARWICH

FINANCIAL ASSISTANCE AVAILABLE – Contact Finance Associate at 508-362-6500 x113

Campers Full Name (First/Last): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_ \*All campers must have completed kindergarten, ask about enrolling your child in Early Education!

## PLEASE CHECK OFF DESIRED WEEKS OF CAMP

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Unit 3 – Falcons 11-13yrs	M \$245 N \$350										
<b>EXTENDED CARE</b>	FEES										<b>TOTAL</b>
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PM   4:00 – 5:30	\$31/week										
AM & PM Care	\$52/week										
REGISTRATION FEE	\$25 (one time fee)										
ADDITIONAL CHILDREN	EACH ADDITIONAL CHILD WILL RECEIVE A \$15 OFF PER WEEK OFF TOTAL TUITION										-
<b>PAYMENT INFORMATION</b>											<b>TOTAL AMOUNT DUE:</b>

Financial aid available for families who need tuition assistance.

Contact Finance Associate at 508-362-6500 x113 or visit us online to download our form.

**BALANCE DUE AT TIME OF REGISTRATION** (One time \$25 registration fee + \$25 per week attending required): \$ \_\_\_\_\_

The \$25 weekly deposit will be applied towards weekly tuition.

Payment in full is due the Wednesday prior to the camper attending.

**WEEKLY TUITION FEES MUST BE PAID IN FULL BY 5PM THE WEDNESDAY PRIOR TO THE WEEK OF YOUR CAMPER'S SCHEDULED ATTENDANCE.**

Make checks payable to:  
YMCA Cape Cod

Charge \$ \_\_\_\_\_ to the following credit card: \_\_\_\_ Mastercard \_\_\_\_ Visa

Card number: \_\_\_\_\_ Exp: \_\_\_\_\_

Print name of card holder: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

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## MEMBERSHIPS MEANS SO MUCH MORE

REDUCED PRICES ON PROGRAMS,  
UNLIMITED GROUP EX CLASSES,  
CHILD WATCH AND SO MUCH MORE

### YOUR MEMBERSHIP BENEFITS

#### GROUP FITNESS

People who participate in a group are more likely to achieve their fitness goals and stay active. Join in more than 50 free classes offered on a weekly basis. Schedules are updated monthly, visit the Welcome Center for details.

#### PROGRAM REWARDS

Members receive priority registration and special pricing on programs, child care, and camp. Some restrictions may apply.

#### SPECIAL EVENTS

Family members receive free admission to one family-focused special event per year.

#### CHILD WATCH

Family members have access to the Y's Child Watch facilities.

Hours: Monday – Saturday | 9:00am–12:00pm & 4:00pm–7:30pm

# REGISTRATION – REGISTRATION INSTRUCTIONS

1. Before completing the registration form, please discuss the choices available with your child. This will ensure your child has a positive camp experience.
2. Pull out respective camp reg. pages; Lyndon 6, West Barnstable 9, Falmouth 11, Harwich 13, AND 15-20.
3. Fill out camp registration forms completely.
4. Make sure your child's age corresponds to the required age of each camp. Please use your child's age as of the Monday of the week you are registering for.
5. Take your completed registration forms with your payment to the Welcome Center at the YMCA Cape Cod. Mail to YMCA Cape Cod, 2245 Iyannough Road, West Barnstable, MA 02668. Remember, these forms must be accompanied by \$25 one time registration fee and \$25 per week deposit. If you misplace a form or need extra copies, additional forms may be downloaded at [www.ymcacapecod.org](http://www.ymcacapecod.org). Please note, any incomplete registrations without required deposits will not be processed.
6. **Financial aid available for families who need tuition assistance. Applications are due 30 days prior to your child starting camp. Contact Finance Associate at 508-362-6500 x113 or download our form.**
7. For registration fee, deposit, payment, cancellation and refund policies please refer to your handbook.
8. Your child will not be allowed to attend camp until all necessary forms and info have been turned into our business office, and weekly tuition is paid in full. All paperwork and payments are due by 5pm the Wednesday prior to attend camp.

## REGISTRATION FORM

Camper's Full Name (First/Last): \_\_\_\_\_

M/F \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Do you have a YMCA Cape Cod Membership? Yes \_\_\_ No \_\_\_

Permanent Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Summer Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Parent/Guardian's Name \_\_\_\_\_ Work Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**CAMP  
LYNDON**  
SEE PAGE 3

**CAMP WEST  
BARNSTABLE**  
SEE PAGE 8

**CAMP  
FALMOUTH**  
SEE PAGE 10

**CAMP  
HARWICH**  
SEE PAGE 12

# REGISTRATION – MEDICAL HISTORY

HIPAA – All health records are securely stored and kept confidential according to all HIPAA laws.

**Please write legibly and print all information for ease of registration.**

## MUST BE FILLED OUT EACH YEAR

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Physician \_\_\_\_\_ Physician's Phone Number \_\_\_\_\_

Address of Physician \_\_\_\_\_

Name of Dentist \_\_\_\_\_ Dentist's Phone Number \_\_\_\_\_

Name of Orthodontist \_\_\_\_\_ Orthodontist's Phone Number \_\_\_\_\_

Do you carry medical/hospital insurance? Yes \_\_\_\_ No \_\_\_\_ Insurance Carrier \_\_\_\_\_

\*Make sure forms are filled out completely. If not applicable, please write N/A.

**Chronic or recurring illness/medical condition**

**Dietary restrictions**

**Allergies**

**Current Medications**

**Behavior concerns we should be aware of:**

## CHILD CAN NOT ATTEND CAMP WITHOUT FOLLOWING DOCUMENTATION

**PLEASE SUBMIT NEW DOCUMENTS REGARDLESS OF OTHER PROGRAMS CURRENTLY ENROLLED PER THE DEPARTMENT OF PUBLIC HEALTH.**

## PHYSICAL FORM TO BE ATTACHED

I \_\_\_\_\_ understand that I must request a current (within the last two years) copy of my child's physical from his/her physician and submit that form for this registration to be complete.

Parent/Guardian's Initials: \_\_\_\_\_

## IMMUNIZATION FORM TO BE ATTACHED

I \_\_\_\_\_ understand that I must request a copy of my child's immunization record from his/her physician and submit that form for this registration to be complete.

Parent/Guardian's Initials: \_\_\_\_\_

# REGISTRATION – CONTACT & EMERGENCY INFORMATION

**Your child will not be released to any person other than those indicated on the sheet below. Photo I.D. is required by anyone when picking up a child.**

In case of an emergency/ illness, we will call the following contacts in the order listed unless otherwise noted.

## EMERGENCY CONTACTS / AUTHORIZATION FOR PICK – UP

For your child's protection and safety it is mandatory that the Camp Director have your current phone number and at least one emergency contact at all times. All changes to this information must be given directly to the Camp Director.

If early pick-up is deemed necessary by director due to illness or discipline issues, a call will be made to you the parent or your emergency contact. **It is our policy that pick-up take place within the hour.**

**Parent/Guardian/Relationship** \_\_\_\_\_ **Best Phone#** \_\_\_\_\_

**Address** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Parent/Guardian/Relationship** \_\_\_\_\_ **Best Phone #** \_\_\_\_\_

**Address** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_ **Day Phone #** \_\_\_\_\_

**Relationship** \_\_\_\_\_ **Other Phone #** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_ **Day Phone #** \_\_\_\_\_

**Relationship** \_\_\_\_\_ **Other Phone #** \_\_\_\_\_

IS THERE A CURRENT RESTRAINING ORDER REGARDING WHO MAY HAVE CONTACT WITH THIS CHILD?

☐ YES ☐ NO

IS THERE A COURT ORDER IN REGARD TO THE CHILD'S CUSTODY?

☐ YES ☐ NO

**IF YES TO EITHER QUESTIONS ABOVE, A COPY OF ORDER IS NEEDED FOR THE CHILD'S FILE.  
PLEASE ATTACH TO REGISTRATION INFORMATION.**

**Signature of parent/guardian** \_\_\_\_\_

**Relationship to child** \_\_\_\_\_ **Date** \_\_\_\_\_

# REGISTRATION – AUTOMATIC WITHDRAWALS

## WEEKLY CAMP TUITION PAYMENTS

### EFT –Electronic Funds Transfer Agreement

Child's name (a separate form is required for each child): \_\_\_\_\_

I, \_\_\_\_\_, authorize my bank to make payment electronically on a weekly basis to the YMCA Cape Cod, to be posted to my child care account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of US. law.

### BANK INFORMATION

Bank Transit Routing # \_\_\_\_\_ Checking Account # \_\_\_\_\_

(Please attach voided check)

Full Name of Bank: \_\_\_\_\_

### PAYMENT DATES AND AMOUNTS

Weekly Amount of EFT= \$ Total account balance First Payment Date: \_\_\_\_\_

1. I understand that child care and other fees change periodically. 30 days advance notice is always given. By signing below, **I authorize YMCA Cape Cod to charge my account for my total outstanding balance each week including any rate increases.**
2. I understand that if I wish to terminate this authorization, I must notify the YMCA Cape Cod in writing at least ten (10) days prior to the next scheduled bank draft transaction.
3. Should any draft not be honored by my bank for any reason, I understand that I am still responsible for that payment plus a service charge (currently \$25) applied by the YMCA Cape Cod This is in addition to any service fee my bank may charge me.
4. I understand that after three unpaid drafts within a year, EFT payments will stop. For the following year, I will be required to pay the amount due each week by check or money order or cash. Cash payments are only accepted at the main reception desk at the West Barnstable YMCA.
5. I understand that if my payments fall behind more than 2 weeks, the YMCA Cape Cod will begin the termination process, as stated in the parent handbook.
6. I understand that the YMCA will process an EFT file weekly. Ordinarily it will be on Thursday, one week in advance, but if the agency is closed or if there are unforeseen circumstances, the YMCA reserves the right to process the EFT on any other day that week. Past due amounts CAN NOT BE PAID VIA EFT. Any past due amount must be paid by check, money order, or cash.
7. I understand that clerical errors can be made and agree to hold the YMCA Cape Cod harmless for any errors made in processing my weekly EFT payments.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Print Name: \_\_\_\_\_

Note: Written debit authorization must provide that the receiver may revoke only by notifying originator as specified in authorization.

# REGISTRATION – WAIVER & AUTHORIZATION FORM

**WAIVERS: Please carefully read, initial, complete the following 6 waivers/authorizations**

## 1) FIELD TRIP WAIVER:

I hereby give my child permission to leave YMCA property on a bus to participate in off-site activities.

Advance notice will always be given.

Parent/Guardian's Initials: \_\_\_\_\_

## 2) PHOTO/MEDIA WAIVER:

I, \_\_\_\_\_ the parent/guardian shown on this form, wish my child to be enrolled in camping programs with the YMCA Cape Cod at one of its sites. I hereby give permission for photographs and other media materials to be used for promotional display purposes and local media and news coverage.

Parent/Guardian's Initials: \_\_\_\_\_

## 3) CAPE COD YMCA, INC. RELEASE AND DISCLOSURE WAIVER:

I am aware in signing this document for my child's participation in various or certain programs and activities offered by Cape Cod YMCA, Inc., that certain elements of such programs or activities can be physically or emotionally demanding. The Cape Cod YMCA staff will use reasonable efforts to minimize my child's exposure to known risks, but I recognize that not all dangers and hazards can be foreseen. Further, I am aware that certain inherent risks exist in some programs and activities that are beyond the control of the Cape Cod YMCA. I acknowledge the absolute responsibility of my child to follow safety rules, standards, guidelines and procedures established for each activity and program. Failure to follow such rules and regulations may result in my child's dismissal from the program. I will encourage my child to ask for clarification or assistance if he/she doesn't understand any safety instructions.

I knowingly release and hold Cape Cod YMCA, Inc., and its employees, agents, volunteers, officers and directors, harmless from and against all liability for loss or injury to my child resulting from his/her participation in any activity or program. I agree to indemnify Cape Cod YMCA, Inc., and its employees, volunteers, agents, officers and directors, for all costs and expense which it or they may incur due to claims or demands alleging such an injury, including settlement payments, court judgments, and legal defense fees. I agree that Cape Cod YMCA shall have final authority regarding the defense and settlement of claims or suits brought against it or any of its employees, agents, volunteers, officers or directors, claiming any such injury.

Parent/Guardian's Initials: \_\_\_\_\_

## 4) AUTHORIZATION TO ADMINISTER MEDICATION FORM REQUIREMENT:

I \_\_\_\_\_ understand that the Authorization To Administer Medication Form must be completed prior to camp. Contact the Camp Director with any questions. This form will be available prior to and on the first day of each session of camp. Medications MUST be brought to camp by a parent/guardian. Medications MUST be in the original container with a correct and current prescription label (pharmacy will provide a separate container upon request).

Parent/Guardian's Initials: \_\_\_\_\_

## 5) AUTHORIZATION TO PROVIDE CARE:

In the event of illness or accident to my child while attending YMCA Summer Camp, I hereby authorize the Director, Nurse of the Camp or the medical personnel selected by the Camp Director to administer and/or secure prompt medical treatment for my child. I also give permission to release any records necessary for insurance purposes and to provide or arrange related transportation for my child to the nearest medical facility as necessary. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to secure and administer treatment, including hospitalization for my child. I also state this health history is correct to the best of my knowledge, and the person herein described has permission to engage in all camp activities except as noted.

Parent/Guardian's Initials: \_\_\_\_\_

# REGISTRATION – WAIVER & AUTHORIZATION FORM

**WAIVERS: Please carefully read, initial, complete the following 6 waivers/authorizations**

## 8) HIGH ROPES WAIVER:

Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue

**NOTICE: This is a legally, binding agreement.** Read this document carefully and in entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in Cape Cod YMCA, Inc. Programs, now or any time in the future.

### Acknowledgment of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge and agree that participation in Challenge Course/Ropes activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with Challenge Course/Ropes participation, including but in no way limited to: (1) slips, trips, and falls, (2) encounters with nature including toxic plants and animals, (3) aquatic injuries, and (4) athletic injuries. I further acknowledge that the preceding list is not inclusive of all possible risks associated with Challenge Course/Ropes participation and that said list in no way limits the operation of this Agreement.

### Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of \_\_\_\_\_'s participation in YMCA Cape Cod, Inc.'s Challenge Course/Ropes program, \_\_\_\_\_ the parent/ guardian of the minor named above, agree to release and on behalf of myself and the minor named above, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE Cape Cod YMCA, Inc., its officers, agents, and employees from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against Cape Cod YMCA, Inc. on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of Cape Cod YMCA, Inc. facilities/equipment or participation in Cape Cod YMCA, Inc. programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Cape Cod YMCA, Inc., its officers, agents, and employees.

In consideration of the named minor's participation in Challenge Course/Ropes I, the undersigned parent/guardian of the named minor, agree to INDEMNIFY AND HOLD HARMLESS Cape Cod YMCA, Inc., its agents and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to the named minor's Challenge Course/Ropes participation.

I hereby certify on behalf of myself and the named minor that I have full knowledge of the nature and extent of the risks inherent in Challenge Course/Ropes participation and that I, on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, the named minor sustains while participating in Challenge Course/Ropes and that by signing this agreement I hereby, on behalf of myself and the named minor, release Cape Cod YMCA, Inc., its officers, agents, and employees of all liability for such loss, damage, or death. I further certify that the named minor is in good health and has no conditions or impairments which would preclude his/her safe participation in Challenge Course/Ropes.

I, in my legal capacity as parent/guardian of the named minor, expressly agree, on behalf of myself and the named minor, that this document is intended to be as broad and inclusive as permitted by the law of Massachusetts and that if any portion of the document is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. Furthermore, I expressly agree that this document shall be governed by and interpreted in accordance with the laws of Massachusetts and that Massachusetts shall have exclusive venue to hear any and all disputes relating to or arising from this document.

I further certify that my date of birth is \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YYYY), that my present age is \_\_\_\_\_, that I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will. The foregoing written agreement represents the entire understanding between the parties. No oral representations, statements or inducement apart from the foregoing written agreement have been made.

IN WITNESS WHEREOF, this instrument is duly executed this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

Participant Name (Print Clearly)

Parent/Guardian Signature

Parent/Guardian Name (Print Clearly)



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Y, THERE'S MAGIC**

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of your gift  
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community.

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**THANK YOU TO THE GENEROUS ORGANIZATIONS THAT HAVE DONATED THEIR TIME, TALENT AND  
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