

2021 CAMP OCKANICKON FOR BOYS REGISTRATION FORM

Please print legibly, complete all sections and mail pages 1-4 with payment to:
YMCA of the Pines 1303 Stokes Road, Medford NJ 08055 or fax to 609-654-8895
 For more information, please call 609-654-8225 or email info@ycamp.org

Camper Information: (use blue or black ink)

First Name _____ Middle Initial _____ Last Name _____
 Street Address _____ City _____ State _____ Zip _____
 Camper Lives With? Both Guardians Guardian #1 Guardian #2 Other _____
 Camper Race: (For reporting purposes) White Hispanic/Latino Black or African American Asian Pacific Islander
 American Indian Two or more races Decline response
 Birth Date ___/___/___ School Name _____ Grade Entering Fall '21 _____ Returning Camper? Y N
 Shirt Size: YS YM YL AS AM AL AXL AXXL
 List 1 friend request (Must be same grade/mutual. Not guaranteed.) _____

Guardian #1 Information:

Mr. Mrs. Ms. Other
 First Name _____ Middle Initial _____ Last Name _____
 Birth Date ___/___/___ Email _____ Please use for corresponding and invoices
 Home Phone _____ Cell Phone _____
 Work Phone _____ Relationship to camper _____
 Employer Name _____ Occupation _____

Guardian #2 Information:

Mr. Mrs. Ms. Other
 First Name _____ Middle Initial _____ Last Name _____
 Birth Date ___/___/___ Email _____ Please use for corresponding and invoices
 Home Phone _____ Cell Phone _____
 Work Phone _____ Relationship to camper _____
 Employer Name _____ Occupation _____
 Address (if different from camper's) _____

Family Status Information:

Marital Status: Single Married Divorced
 Separated Widowed
 Has there been a divorce in the family? Yes No
 If yes, who has custody of the camper _____
(print joint if applies)

The joint/non-custodial parent:

Should be contacted in case of emergency
 Has permission to pick up camper

Guardian #1 Race: for reporting purposes

White Hispanic/Latino Black or African American
 Asian Pacific Islander American Indian
 Two or more races Decline response

Guardian #2 Race: for reporting purposes

White Hispanic/Latino Black or African American
 Asian Pacific Islander American Indian
 Two or more races Decline response

Emergency Contacts and Authorized Pick Up Persons besides Guardians. PLEASE PRINT CLEARLY **DO NOT LIST GUARDIANS

Please list individuals we may contact in an emergency and who you authorize to pick up your camper from camp.

Name _____	Name _____	Name _____
Relationship to Camper _____	Relationship to Camper _____	Relationship to Camper _____
Cell _____	Cell _____	Cell _____
Home _____	Home _____	Home _____
Work _____	Work _____	Work _____

Are you interested in volunteer opportunities at camp for you and/or your family? Yes Not at this time

How did you hear about our camp? _____

Refer a Friend to Camp! We know "word-of-mouth" is truly the best advertising. As a way to say "thank you," we are offering the referring family \$100 for each new camper referred who attends one of our sleep away camps. The new camper family will also receive \$50 off their camp registration. Please visit www.ycamp.org to read the Refer a Friend guidelines and to submit an online referral. **Only referrals submitted through the "Refer a Friend" form on our website are eligible for consideration of this offer.**

If you have been referred to camp, please indicate who referred you. _____

For Camp Use Only: Camper Last Name

First Name

Camper Last Name: _____

First Name: _____

- 1** Review camp programs & circle your pricing level **2** Select camp programs & dates **3** Select additional services if needed

PROGRAMS AND RATES		A	B	C	Why do we offer 3 prices for camp? Read below for an explanation of our tiered pricing. The tiered pricing system is an "honor system" designed to make camp more affordable and accessible. Levels B & C are below the true cost of camp, so we ask that all parents who can afford to pay Level A please do so. All chosen levels are confidential and all children receive the same great camp experience regardless of level. Larger scholarships are available by applying for needs-based financial assistance. Please circle your tier choice to the left. If no level is circled, Level A is used.
Ockanickon for Boys Ages 7-16	One Week	\$870	\$815	\$760	
Ockanickon for Boys Ages 7-16	Two Week	\$1,685	\$1,560	\$1,460	
Co-ed Overnight Ages 7-16	One Week	\$870	\$815	\$760	
Overnight Mini-Camp Trial Ages 6-8 <small>*Limited Enrollment accepted</small>	Sunday - Wednesday	\$249			

CAMP PROGRAMS & DATES Check box(es) of session(s) you would like to attend	Session 1 6/27 to 7/3 1 Week	Session 2 7/4 to 7/10 1 Week	Session 3 7/11 to 7/24 2 Weeks	Session 4 7/25 to 8/7 2 Weeks	Session 5 8/8 to 8/14 1 Week	Session 6 8/15 to 8/21 1 Week	Session 7 8/22 to 8/28 1 Week
Ockanickon for Boys Overnight							
Co-ed Overnight <i>(held at Camp Matollionequay)</i>							
Overnight Mini-Camp Trial Ages 6-8 Only		7/4-7/7	7/11-7/14	New to overnight camp? Try a Mini-Camp session for only \$249			

ADDITIONAL SERVICES		Check box(es) of session(s)						
One Week Horseback Riding 1 hour daily, minimum age 7	\$225							
Two Week Horseback Riding 1 hour daily, minimum age 7	\$425							
Changeover Weekend <i>(Saturday-Sunday)</i>	\$150	Ses 1-2	Ses 2-3	Ses 3-4	Ses 4-5	Ses 5-6		
Welcome to Camp Kit	\$40	<input type="checkbox"/> Check box to purchase kit. Includes a drawstring backpack, water bottle, flashlight, postcards and more!						

PARTICIPATION AGREEMENT AND FINANCIAL TERMS: Please read carefully, sign, and date.

I hereby enroll my child and enclose a non-refundable deposit or payment in full. I understand the following:

- Any balances owed will be automatically charged between June 7, 2021 and June 11, 2021 to the credit/debit card on file.
- Registrations received after June 1, 2021 must be accompanied by payment in full.
- Refunds on amounts paid, less deposit, may be approved up to May 31, 2021. Refunds will be made in the same form that payment was made.
- There are no refunds available after May 31, 2021.
- If you cancel after May 31, 2021 due to your child's health and you can provide documentation from your child's pediatrician/licensed medical provider, you will be refunded all fees paid less the deposit per session.
- One change of session per family is allowed at no cost up to May 1, 2021, pending available space. Thereafter, a \$35 fee for each change request will be applied.
- Cancellation of a session does not qualify as a change.
- No refunds are given when a camper's behavior warrants dismissal from the program or when the parent voluntarily withdraws the child from camp for any reason.
- Completion of all summer camp forms, including the review and signing of the participation waiver, and payment in full prior to my child attending camp.

Signature of Guardian: _____ Date: _____

Print Guardian Name: _____

Print Camper Name: _____

Camper Last Name:

First Name:

Camp Ockanickon Character and Leadership Development Programs for Boys
 Minimum enrollment required for each individual program to operate. Limited enrollment accepted.

TIERED PRICING RATES		A	B	C	Please Circle your tier choice
LEADERSHIP TRIALS A & B Ages 14- 16	Two Week Session	\$1,685	\$1,560	\$1,460	

The tiered pricing system is an "honor system" designed to make camp more affordable and accessible. Levels B & C are below the true cost of camp, so we ask that all parents who can afford to pay Level A please do so. All chosen levels are confidential and all children receive the same great camp experience regardless of level. Larger scholarships are available by applying for needs-based financial assistance. Please circle your tier choice to the right. If no level is circled, Level A is used.

Rangers Wilderness Trips Boots & Boats I & II Ages 15-16 (we'll allow 17 for 2021) \$1,865	This 9 day, 8 night off-site backcountry journey challenges campers both physically and mentally as they backpack through a section of the Appalachian Trail and canoe through the beautiful Delaware River National Recreation area. Campers are given the opportunity to build leadership skills, courage, confidence, friendship, and a deeper appreciation of the outdoors.
CIT Ages 16-17 4 week program, inclusive of weekends \$2,495	A 4-week character and leadership development program which trains your son to be a mentor and leader for youth participants in a camp program. Core to the program are the six heroic potentials. CIT Trainees must strive to embody these potentials and help youth participants develop and embody them as well. An additional application is required.

CAMP PROGRAMS & DATES Check box(es) of session(s) you would like to attend	Session 1 6/27-7/3 1 Week	Session 2 7/4-7/10 1 Week	Session 3 7/11 -7/24 2 Weeks	Session 4 7/25 -8/7 2 Weeks	Session 5 8/8- 8/14 1 Week	Session 6 8/15 -8/21 1 Week	Session 7 8/22 -8/28 1 Week
Leadership Trials A			TRIAL A				
Leadership Trials B				TRIAL B			
Rangers Boots & Boats I			BB I				
Rangers Boots & Boats II				BB II			
CIT A	CIT A	CIT A	CIT A				
CIT B				CIT B	CIT B	CIT B	

Please list any items from our Rangers packing list that you would like us to assist with providing. Please note sizes and designate adult or youth sizes.

CAMPER DROP OFF & PICK UP HOURS:

DROP OFF: Sunday's between 2-4pm at the Ockanickon Dining Hall
PICK UP: Saturday's between 9-10 am at the Ockanickon Dining Hall

ADDITIONAL SERVICES	Trading Post [camp store] funds can be added to your camper's account at the time of registration by submitting additional funds, online at www.ycamp.org through your account in our registration portal, or at the time of check-in.		
	Welcome to Camp Kit	\$40	<input type="checkbox"/> Check box to purchase a kit. Includes a drawstring backpack, water bottle, flashlight, postcards and more!

Camper Last Name:

First Name:

1 Calculate your camp fee

2 Choose your payment option

3 Mail all completed forms to camp

CALCULATE YOUR FEE— Complete all applicable columns to calculate total camp fee.

<u>COLUMN 1— SESSION FEES</u>	<u>COLUMN 2— ADDITIONAL OPTIONS</u>	<u>COLUMN 3— DISCOUNTS</u>	<u>TOTAL FEE</u>
Total Price of Session(s) \$ _____	Horseback Riding \$ _____	Multiple Session \$ (_____) <i>Save \$\$\$ and sign up for more than 1 session. Take \$50 off each session registered for after the 1st.</i>	Column 1 PLUS Column 2 MINUS Column 3 = TOTAL FEE
_____% Military Discount \$ (_____) <i>(applies to Level A only - see www.ycamp.org for details)</i>	Changeover Weekend(s) \$ _____ <i>Changeover is not needed when registering for a 2 week session unless you are registering for an additional session other than Session 3 or 4.</i>	One-Time Sibling \$ (_____) <i>\$50 per child after 1st registered. 1st registered child cannot receive discount. Limit 1 discount per child.</i>	
<i>Y Non-Member Fee</i> \$ <u>30</u>	Welcome Kit \$ _____	Names of other child(ren):	
Y members and School's Out Participants may cross off the fee.	Camp Store (Trading Post) \$ _____	1) _____ 2) _____ 3) _____ 4) _____	
Indicate the name of the YMCA, in which you are a member, or the School's Out site: _____	<i>Any unspent Trading Post funds will be donated to the Camper Scholarship Fund. Your camper will have an opportunity to spend down their account on the last scheduled visit to the Trading Post and on Check Out day</i>		
Office Use Only \$ _____			
COLUMN 1 TOTAL \$ _____	COLUMN 2 TOTAL \$ _____	COLUMN 3 TOTAL \$ (_____) \$ _____	

PAYMENT OPTIONS: All Camp Fees must be paid in full prior to attendance at camp

- I wish to pay the total camp fees of \$ _____ now.
- I wish to pay a **non-refundable** deposit of \$250 per session plus **full payment** for any Additional Services selected. Any outstanding balance will be charged to my credit card on file between 6/7/2021 and 6/11/2021.
- I wish to pay a **non-refundable** deposit of \$250 per session plus **full payment** for any Additional Services selected **AND** please enroll me in a payment plan. I understand my remaining balance will be charged in equal amounts each month until the week between 6/7/2021 and 6/11/2021, when the final balance will be charged. **A credit card must be on file to select a payment plan.**
- Check *(Make payable to YMCA of the Pines)* or charge \$ _____ to my: [] Visa [] M/C [] AMEX [] Discover

Card # _____ Exp Date _____ Sec Code _____

Billing Address _____

Name on Card _____ Signature _____

PLEASE NOTE: By signing above, I/we understand that any balances owed will be automatically charged between June 7, 2021 and June 11, 2021 to the credit/debit card above unless alternative arrangements have been made.

Note: The Camper Medical Form, the Participation Waiver and Overnight Parent Confidentiality Form have to be completed through the online registration parent portal. Once this paper registration is entered into our system, you will receive a confirmation email with instructions on creating a user account and password. You will then be able to access your camper's account to electronically complete the forms. Credit card information is not required to create a user account for the parent portal.

Thanks to the support of caring individuals, YMCA of the Pines is able to provide over \$500,000 in scholarships and financial assistance to over 700 children and teens who are unable to experience the magic of our programs due to financial hardship. Please consider making a tax-deductible contribution to YMCA of the Pines, so we can continue to provide these opportunities for children and teens in the future. To make a donation online, please visit us at

www.ycamp.org.

Give the Gift of Opportunity!