



# MEADOWLANDS YMCA SUMMER CAMPS

## WHAT TO BRING TO CAMP EACH DAY

PLEASE ADD CHILD'S NAME TO EVERYTHING THEY BRING TO CAMP.  
IF ANY SUPPLIES ARE NEEDED, YOUR COUNSELOR WILL INFORM YOU.

### WHAT TO BRING:

- Bathing suit
- Swim Cap
- Towel
- Sunscreen
- Non-perishable lunch
- Water bottle
- Change of clothes
- And a positive attitude!

### WHAT TO WEAR:

- Closed toe shoes (preferably sneakers)
- Comfortable clothes that can get messy!



### WHAT NOT TO BRING:

- Any toys from home
- Any kind of technology



Did you know that kids age 5-10 have an average of six hours of screen time each day? That's one of the reasons why we do not permit the use of cell phones, cameras, and other electronic devices during camp hours. We want your camper to get the most out of their time at camp!

# MEADOWLANDS YMCA SUMMER CAMP 2023 REGISTRATION FORM

**ONE FORM PER CHILD** Submit completed forms to Meadowlands YMCA, 390 Murray Hill Parkway East Rutherford, NJ 07073 or camps@meadowlandsymca.org

**CAMPER** Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age as of 7/1/2023 \_\_\_\_\_ Grade as of 9/1/2023 \_\_\_\_\_ Gender \_\_\_\_\_

**PARENT/GUARDIAN** Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Home Address \_\_\_\_\_ City/Zip \_\_\_\_\_ Cell Phone (Required) \_\_\_\_\_

Email \_\_\_\_\_

CAMP	NO. OF DAYS	WEEK 1 JUN 19-23	WEEK 2 JUN 26-30	WEEK 3 JUL 3-7 NO CAMP 7/4	WEEK 4 JUL 10-14	WEEK 5 JUL 17-21	WEEK 6 JUL 24-28	WEEK 7 JUL 31-AUG 4	WEEK 8 AUG 7-11	WEEK 9 AUG 14-18	WEEK 10 AUG 21-25	TOTAL				
<b>JR. CAMP MEADOWLANDS AGES 5-7</b>	5	<input type="checkbox"/> \$300	SOLD OUT	<input type="checkbox"/> \$240	SOLD OUT						\$ _____					
	3 T-TH	SOLD OUT										\$ _____				
<b>CAMP MEADOWLANDS AGES 8-11</b>	5	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$240	SOLD OUT						\$ _____					
	3 T-TH	SOLD OUT										\$ _____				
<b>BRAINIAC ACADEMY 1<sup>ST</sup>- 3<sup>RD</sup> GRADERS</b>	5	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$296	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	<input type="checkbox"/> \$375	\$ _____				
	Offsite at Robert L Craig School in Moonachie hours are 8am-4pm (before and aftercare not available at this site)															
<b>TRAVEL CAMP AGES 7-11</b>	5	<input type="checkbox"/> \$395	<input type="checkbox"/> \$395	<input type="checkbox"/> \$304	SOLD OUT						<input type="checkbox"/> \$395	<input type="checkbox"/> \$395	\$ _____			
	3 T-TH	SOLD OUT										\$ _____				
	Add'l Trips*		Land of Make Believe <input type="checkbox"/> \$45		Dorney Park <input type="checkbox"/> \$65		FunPlex <input type="checkbox"/> \$65			Camelback <input type="checkbox"/> \$65		\$ _____				
<b>SPORTS CAMP AGES 6-11</b>	5	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$288	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365	\$ _____				
	Offsite at East Rutherford Civic Center hours are 8:30am-5pm (before care available, aftercare not available at this site)															
<b>SUMMER SEEDLINGS AGES 3-5</b>	5	<input type="checkbox"/> \$327	<input type="checkbox"/> \$327	<input type="checkbox"/> \$262	SOLD OUT						\$ _____					
	3 T-TH	SOLD OUT										\$ _____				
<b>ADD ONS</b>	<b>BEFORE CARE 7:00AM-8:30AM</b>	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	\$ _____				
	<b>AFTERCARE 4:30PM-6:30PM</b>	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	\$ _____				
	<b>TRAVEL CAMP SHIRT*</b> ONE SHIRT INCLUDED CAN PURCHASE UP TO 2 MORE	YOUTH SMALL	<input type="checkbox"/> \$15	YOUTH MEDIUM	<input type="checkbox"/> \$15	YOUTH LARGE	<input type="checkbox"/> \$15	ADULT SMALL	<input type="checkbox"/> \$15	ADULT MEDIUM	<input type="checkbox"/> \$15	ADULT LARGE	<input type="checkbox"/> \$15	ADULT X-LARGE	QUANTITY LIMIT 2	X _____

\*ADDITIONAL TRIPS AND TSHIRT FEES MUST BE PAID UPON REGISTRATION

**CAMP TOTAL \$ \_\_\_\_\_**

## PAYMENT OPTIONS

AUTO DRAFT PAYMENTS				PAY IN FULL			
payment method on file will be charged remaining balance of each week 10 days prior to the start of each week.							
<b>NON-REFUNDABLE PROCESSING FEE TOTAL</b>				<b>NON-REFUNDABLE PROCESSING FEE TOTAL</b>			
\$30				\$30			
<b>NON-REFUNDABLE DEPOSIT (NUMBER OF WEEKS ____ X \$50)</b>				<b>TOTAL CAMP COST</b>			
\$ _____				\$ _____			
<b>UPFRONT FEES: ADD ONS &amp; ADDITIONAL TRIPS</b>				<b>ADD ONS &amp; ADDITIONAL TRIPS</b>			
\$ _____				\$ _____			
<b>TOTAL DUE TODAY</b>				<b>TOTAL DUE TODAY</b>			
\$ _____				\$ _____			

**ACKNOWLEDGMENT:** I understand that all upfront fees and deposits paid at the time of registration are non-refundable. Also, no makeup days, refunds or credits are offered for any kind of absence. To attend camp, tuition must be paid in full prior to attending and my camper's CampDoc profile must be 100% complete.

Initial \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**AUTO-DRAFT AUTHORIZATION:** I authorize the Meadowlands YMCA to automatically charge this payment method for the weekly balance. I understand I will be charged 10 days prior to the start of each weekly session. I assume all responsibility to notify the YMCA in writing of any changes that may affect this agreement.

Initial \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## PAYMENT METHOD

- Check \*Make check payable to Meadowlands YMCA.  
 Visa  MasterCard  American Express  Discover

- EFT Draft Checking  EFT Draft Savings

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Routing # \_\_\_\_\_

Print Name as it appears on Credit Card \_\_\_\_\_

Account # \_\_\_\_\_

Signature \_\_\_\_\_

Bank Name # \_\_\_\_\_

Attach copy of VOIDED check or Bank Specification letter \_\_\_\_\_

Print Name on Account \_\_\_\_\_

