



AUGUST 25TH – 29TH

School's out, but the fun isn't over at the Meadowlands YMCA! With summer camp wrapped up and school not yet in session, IDEA Camp is the perfect way to keep kids engaged, active, and enriched. This special end-of-summer program offers a camp-style experience filled with hands-on STEM, arts & crafts, swimming, and more!



7:00am–6:00pm
\$80 per day
Register Online



SIGN UP TODAY!
Limited space available

2025-2026 CLUB I.D.E.A. REGISTRATION FORM

ONE FORM PER CHILD Submit completed forms to

Meadowlands YMCA, 390 Murray Hill Parkway East Rutherford, NJ 07073 or SACC@meadowlandsymca.org

CHILD Full Name _____ Home Phone _____

Date of Birth _____ Age as of 7/1/2025 _____ Grade as of 9/1/2025 _____ Gender _____

Home Address _____ City/Zip _____

PARENT/GUARDIAN Full Name _____ Date of Birth _____

Home Address _____ City/Zip _____


Work Phone _____ Cell Phone (Required) _____ Email _____

2025 DATES	AUG 25	AUG 26	AUG 27	AUG 28	AUG 29			
	<input type="checkbox"/> \$80	<input type="checkbox"/> \$80	<input type="checkbox"/> \$80	<input type="checkbox"/> \$80	<input type="checkbox"/> \$80			TOTAL


PAYMENT OPTIONS TOTAL COST \$ _____

AUTO DRAFT PAYMENTS <small>payment method on file will be charged 10 days prior to the start of each day</small>			PAY IN FULL		
NON-REFUNDABLE PROCESSING FEE TOTAL			\$30	NON-REFUNDABLE PROCESSING FEE TOTAL	
NON-REFUNDABLE DEPOSIT (NUMBER OF DAYS _____ X \$40)			\$ _____	TOTAL COST	
TOTAL DUE TODAY			\$ _____	TOTAL DUE TODAY	

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 CLUB I.D.E.A., tuition must be paid in full prior to attending and parent pack must 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 daily 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

☐ MasterCard ☐ American Express

☐ Discover ☐ Visa

Credit Card Number _____ Exp. Date _____

Print Name as it appears on Credit Card _____

Signature 

3% charge on all card transactions

☐ EFT Draft Checking ☐ EFT Draft Savings

Routing # _____

Account # _____

Bank Name _____

Attach a copy of voided check or bank specification letter

Print Name on Account _____