

2012 CAMP ECHO FAMILY CAMP REGISTRATION FORM

See instructions for this form on page B. Photocopies are acceptable.

Personal & Family Information

Camper's Name: _____ Male Female Date of Birth: _____

"Camper's Name" must be a YMCA member if you are registering during the member registration period.
All mailings are directed to the person named above at the address listed below. Split families should plan accordingly.

Is the camper: Returning camper from 2010/11 Family member of a returning camper New camper

Address: _____ City: _____ State: _____ Zip: _____

Adult Contact's Name: _____ Day Phone: _____

Evening Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Is the adult listed above a McGaw YMCA staff member? No Yes: Full-time Part-time Supervisor: _____

YMCA Membership

Current Membership Status: McGaw YMCA Member Member of Other YMCA (enclose copy of membership card) Non-Member

To purchase a McGaw YMCA membership, visit Member Relations at 1000 Grove Street in Evanston, 847.475.7400 x286.

Camp Registration

A \$100 deposit is required for each program.

- Memorial Day Weekend Family Camp (May 25-28)
- Family Camp Week 1 (August 19-24)
- Family Camp Week 2 (August 25-30)
- Labor Day Weekend Family Camp (Aug 31-Sept 3)

Prices

\$195 A, \$130 Y, \$45 PS
\$450 A, \$300 Y, \$100 PS
\$375 A, \$250 Y, \$85 PS
\$195 A, \$130 Y, \$45 PS

Number of People in Your Group

You will be billed based on this information.
You can call us to make an adjustment later.

Adults age 19+ _____

Youth age 6-18 _____

Youth age 1-5 _____

For family camp, camper cabins have a minimum fee equal to 2 adults and 2 youth age 6-18 (\$650 weekends, \$1500 week 1, \$1250 week 2). Peak cabins have a minimum fee equal to 2 adults (\$390 weekends, \$900 week 1, \$750 week 2). No minimum fee for an original staff cabin.

Housing Choice

Indicate a 1st and a 2nd choice. If you do not indicate a second choice and your first choice is full, you will be wait-listed for your first choice.

- _____ camper cabin (6 lower beds, 6 upper beds)
- _____ peak cabin (2 lower, 2 upper)
- _____ original staff cabin (ranges in size from 3 beds to 14 beds)

For family camp, each family has their own cabin, unless you choose to share a cabin with another family; in that case, one family should sign up and pay the entire fee to us. If you are sharing a cabin, list the other family name here if known at this time: _____

Scholarship I am applying for a scholarship. (See instructions on page B.)

Payment Check one (See Page A): Single Payment of Balance Due Monthly Draft Plan

Total Amount of Deposit: \$ _____ Method of Payment: Check Visa MC Discover AMEX

Paying by check helps Camp Echo by significantly reducing bank fees.

Please make checks payable to McGaw YMCA. CC Account #: _____ Expiration: _____ Billing ZIP: _____

Signature (required for Credit Card payment) _____

Date _____

**Mail completed form with non-refundable deposit(s) to
Camp Echo Registration, McGaw YMCA, 1000 Grove St, Evanston, IL 60201**

For Office Use Only

Date _____ Deposit _____ Staff Initials _____ Discount _____ Wait List _____