



**2009 SUNSATION DAY CAMP REGISTRATION FORM
HALF DAY SPORT CAMP**

CHILD'S NAME _____ GRADE AS OF 9/09 _____

CHILD'S AGE: _____ HOME PHONE: _____

INSTRUCTIONS FOR REVERSE SIDE OF THIS FORM

**Please select your camp choice(s) by circling the appropriate code in your
chosen camp site/session lines.**

HD: Half Day Sports Camp Only

PARENT NAME: _____ WORK PHONE: _____

PARENT NAME: _____ WORK PHONE: _____

STREET ADDRESS: _____

CITY _____ STATE: _____ EMAIL: _____

Please check following if they apply to your family:

_____ YMCA Staff _____ Peter Becker Staff _____ Subsidy

_____ Applying for YMCA Scholarship (must be turned in by 5/22/09)

**NOTE: Please read the Payment Information and Schedule page in your Parent
Handbook for all Payment in Full Dates, Late Fees, and Delinquent policies.**

DEPOSIT INFORMATION:

of Registered Weeks _____ x\$25 (Deposit per week)= _____ Total Deposit

EMPLOYEE USE ONLY

Front Desk Initial: _____ Receipt # _____ Info Packet Received: _____

Membership ID: _____ Expiration Date: _____

2009 SUNSATION DAY CAMP REGISTRATION FORM

Half Day Sports Camp

Child's Name _____ Grade as of 9/09 _____ Age: _____ Home Phone: _____

Weekly Sessions	1	2	3	4	5	6	7	8	9	10	11	12
Camp Options	Dates											
		6/22-6/26		7/6-10	7/13-17	7/20-24		8/3-7	8/10-14	8/17-21		8/31-9/4
Soccer: 05-09DI-04607 (3-8)									@ Harleysville Community Center HD			
Baseball: 05-09DC-04617 (3-8)				@ Skippack Elementary HD				@ Harleysville Community Center HD				
Basketball: 05-09DI-04603 (3-8)		@ IV YMCA HD HC										
Flag Football: 05-09DP-04515 (3-8)						@ Harleysville Scout Cabin Fields HD						
Hip Hop: 05-09DI-04612 (3-8)						@ IV YMCA HD						
Outdoor Games: 05-09DI-04619 (3-8)										@ Harleysville Scout Cabin Fields HD		
Dodgeball : 05-09DI-04620 (3-8)					@ IV YMCA HD							
Sports Combo: 05-09DI-04613 (3-8)												@ Souderton Park Wile Ave HD

PARENTS: PLEASE SELECT YOUR CHILD'S CAMP CHOICE(S) BY CIRLING THE APPROPRIATE CODE IN YOUR CHOSEN CAMP SITE/SESSION

HD = Half Day Camp Sport Only or 1st child for Basketball Camp

HC= 2nd child for Basketball Camp

Parent Name _____ Work Phone _____ Parent Name _____ Work Phone _____

Home Address _____ Number of Weeks Registered _____ x \$25 Deposit = Total Deposit \$ _____

EMPLOYEE USE ONLY

Front Desk Initial: _____ Receipt #: _____ Info. Packet: _____ Member ID: _____ Expiration Date: _____