



Rose E. Schneider Family YMCA Summer Day Camp Waiver

Camper's Name: _____
(First) (Last)

Registration Agreement- Please initial by all statements and sign to indicate understanding and agreement

___ I am aware that activities and schedules are subject to change at the discretion of YMCA Camp Rose and their staff.

___ I understand that deposits for summer programs are non-refundable. I also understand that any changes to registered weeks will result in a \$25 change fee.

___ I understand that any automatic payment that has been declined for any reason will incur a \$10 fee.

___ I understand that change of family plans, dismissal from the program and personal schedules conflict/changes are not sufficient grounds for a refund.

___ I understand that it is the camper's responsibility to participate in the whole camp program including work, play, values sharing, and cooperating throughout daily activities. I'll ensure that my camper abides by the rules of the program and will explain to them that violation of rules related to (but not limited to) inappropriate conversations/contact, disrespect to staff, violence or bullying will result in a dismissal from the program with no refund of camp fees. If my child is suspended or dismissed from the program for the day or week, it is the parent/guardian's responsibility to pick up the participant at camp ASAP.

___ I understand my child's picture may be taken and used for promotions related to Camp Rose and the YMCA.

___ I understand that the staff cannot apply sunscreen but will monitor my child's body application and help with facial application.

___ I understand and give permission for my child to occasionally watch movies that are rated PG at camp.

___ I give permission for my child to attend all field trips with the camp.

___ I understand that the Camp Program and the YMCA assume no financial obligation, but in case of accident or illness, the Camp Staff have my authorization to secure emergency medical attention if unable to communicate with me immediately.

___ I understand that YMCA staff and volunteers are not allowed to babysit or transport children at any time outside of the YMCA programs. The YMCA will take immediate disciplinary action toward staff & volunteers if a violation is discovered.

___ I understand that I am not to leave my child at the YMCA or program site unless a YMCA staff or volunteer is there to receive and supervise my child.

___ I understand that my child will not be allowed to leave the program with an unauthorized person. Any person authorized to pick-up my child must be listed with the YMCA or other arrangements must be made by calling the YMCA office to inform them of a change.

___ I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, staff may have no recourse but to contact the police for the child's safety. Please do not put staff in the position where they have to make this judgment call.

___ I understand that state law mandates the YMCA to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

Parent/ Guardian: _____ Signature _____ Date _____
(Print) (Sign)