

CFA Father - Child Weekend October 19 - 21, 2018

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Please completely fill out this registration and return to **YMCA Camp Flaming Arrow, P.O. Box 770, Hunt, TX 78024** with the non-refundable registration fee per person to guarantee placement for the weekend. Any questions, problems, or concerns please call Ashley Montgomery at (830) 238-4631, email **ashleymo@ymcasatx.org** or fax (830) 238-4280.

Registration Forms due by October 5th, 2018

PLEASE PRINT IN INK Participant(s) Name/ Age:					
Allergies/Dietary Needs and Nar	me of who it applies to:				
Email Address (this is the prima	ry source of communication):				
Telephone:	Alt. Telephone Number:				
Address:	City:		State:	Zip:	
Emergency Contact Name:	Emergency C	ontact Number:	act Number:		
COST: \$85 per person for Y-Member \ \$95 per person for Non-Members with an optional \$50 per family fee to guarantee exclusive use of a cabin					
	gistration includes two nights of lodging. Each of at least one (1) adult per cabin. <i>Families will si</i> Clusive use of one cabin.				
MEALS: Each registration include	des 4 meals: Breakfast, Lunch and Dinner on S	aturday and Breakfa	ast on Sunday	<i>'</i> .	
	erience traditional camp activities such as Archenitting) and learn some of our favorite camp so				
camp, you will join other familie	r an extra fee of \$15 per person. If you elect to es for an hour-long horse experience led by our their own horse on the ride, while children age 250 lbs.	knowledgeable and	l capable wrar	ngler staff. Children	
CHECK-IN BETWEEN 6:30	-8:00 PM FRIDAY EVENING AND CHE	CK-O <u>UT BY 11:0</u>	O AM SUNI	DAY MORNING	
Are you a member of the YM	ICA Of Greater San Antonio?		Price Wo	orksheet	
If so, please list your Member I.D:		# Participar	ıts	x (rate) =	
, ,			ack	x (15) =	
A NON-REFUNDABLE, NON-TRANSFERABLE \$30 DEPOSIT PER PERSON IS DUE WITH THIS REGISTRATION.			Excl. use of Ca	abin(+50) =	
			+ Y-Partners Scholarship Donation =		
Would you like to donate to the Y Partners scholarship fund to assist children attending summer camp?		to	TOTAL CAMP FEE :		
(Circle amount) \$10	- Enclosed	- Enclosed Deposit (# Part. x \$30)=			
Tou may enclose	e the amount now or be billed later	Remaining	Remaining Bal. (due upon arrival)=		
I hereby apply for reservation for my	reby apply for reservation for my group at YMCA Camp Flaming Arrow. I agree to pay a non-refundable, non-transferable \$30 deposit				

I hereby apply for reservation for my group at YMCA Camp Flaming Arrow. I agree to pay a non-refundable, non-transferable \$30 deposit per person due with this registration to guarantee placement for the weekend. I agree to pay the total remaining camp fee balance before or upon arrival. I understand the terms covering payment of camp fees and hereby give my approval and consent to the application. I understand that I must pay in full for the number of adults and children registered on this form or actual attendance (if additional participants are added); whichever is higher. I authorize the YMCA to use photographs, slides, video, or digital images of the person named on this registration for its records, public relations or internet programs.

I understand that all release forms must be completed by the parent/guardian of each child attending and that all adults must also complete a release form. As the adult, I understand that I am responsible for completing all forms and turning them in at check in.

Parent Signature Date