

YMCA Camp Thunderbird

2020 Family Camp - September 4-7 Registration Form

Family Contact Information:

Family Representative Name:		Best Phone:	
Mailing Address:		State:	Zip:
City: Er	mail:		
Emergency Contact Information:			
Name:	Relationship:		
Email:	Best Phone:		
Registration Instructions: Below are outlined the options for lodgin choose 1 lodging option per family. Then *Note – Both Open–Air Cabins and A/C Ca the same cabin, the flat rate can be divide	n select 1 Meal Plan and bins carry a flat rate per	1 Activity Acumum 1 activity Acumum 1 activity Acumum 1 accumum 1	ccess per person . The than one family shares
Lodging Options (make selection on Page 2)			
Tent (Bring your own) \$30/family 3	Nights, Common Showerhou	use Access, N	o Open Fires
Open-Air Cabin (capacity: 14) \$75/cabin 3	Nights, Electric, Common SI	howerhouse A	Access, No Open Fires
A/C Cabin (capacity: 12-16) \$300/cabin 3	Nights, A/C, Electric, Privat	e Showers	
Meal and Activity Plan Overview (Choose one of	each, per person, on Pag	ge 2)	
Meal Plans include 8 meals (Saturday breakfast	– Monday lunch)		
Standard Meal Plan (ages 6+)	•••••	•••••	\$80/person
Child Meal Plan (ages 2–5)	•••••	•••••	\$40/person
Children < 2	••••••		Free
Activity Access Passes**			
Blue Access includes: Non-staffed recreation pool access, pontoon rides, and all staffed Acboats, etc.)			\$40/person
Red Access includes: only non-staffed Recrea		*******	\$15/person

**We will open activities based on our ability to offer them safely as recommended by CDC, ACA, and YMCA of Greater Charlotte guidelines. Some activities listed might not be available. Thank you for understanding.

Registration	Details:					
1) Lodging Options ((Please Choose 1)					
□ \$30/f	☐ \$30/family We will bring our own tent(s).					
□ \$75/d	\$75/cabin We would prefer an Open–Air Cabin, if available					
□ \$300	/cabin We would prefer an A	ir-Conditioned Cabin	ı, <u>if available</u>			
□ \$	We will pay this much	towards a shared Ca	abin with the following family(ies):			
2) Including yourself, please list those you are paying for on this registration. Please select a meal plan and activity						
	l participants ages 2+.	Meal Plan:				
		(1 per person)	Activity Access: (1 per person)	Subtotal:		
Name:	Stand.	ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
Name		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
Name:		ard (\$80) Child (\$40)	Blue (\$40) Red (\$15)			
			•			
Changes and	l Cancellations:		Participant Subtotal:			
Please submit, in writing, any needed changes to this registration.		Lodging Subtotal:				
Cancellations after August 15th will be refunded 50% of total payment.		Total Amount Bus				
			Total Amount Due:			
	PA	YMENT OPTION	NS:			
☐ Please find my check payment enclosed.						
\square Please call me at the number provided above so that I can pay by credit card.						
*To comply with current legislation, we do not take written forms of credit card information.						
SEND COMPLETED REGISTRATION AND RELEASE FORMS TO:						
Anna.Mooney@YMCACharlotte.org, OR						
Ca	amp Thunderbird Family Cam	p, One Thunderbir	d Lane, Lake Wylie, SC 29710			
Lacknowledge that hy	, signing holow I am at least 21 ye	are old and an authoric	and representative of my family. To m	avimiza tha		
I acknowledge that, by signing below, I am at least 21 years old and an authorized representative of my family. To maximize the enjoyment of the event for all attendees, I will hold my family accountable to the policies of Family Camp, YMCA Camp Thunderbird, and the YMCA of Greater Charlotte.						
- I B						
Family Representati	ve Signature		Date			

YMCA of Greater Charlotte Release and Waiver of Liability and Indemnity Agreement

In consideration for being permitted to utilize the facilities, services, and programs of the YMCA of Greater Charlotte (hereinafter referred to as "YMCA") and/or any participation in any program affiliated with the YMCA, without respect to location, I, for myself and any personal representatives, heirs, and next of kin, hereby acknowledge and agree to the following while at the YMCA, regardless of location:

- 1. I HAVE, OR IMMEDIATELY UPON ENTERING OR PARTICIPATING WILL INSPECT AND CAREFULLY CONSIDER YMCA PREMISES, FACILITIES AND/OR THE AFFILIATED PROGRAM. Entering constitutes an acknowledgement that I find and accept them as being safe and reasonably suited for the purpose of observation, use, or participation.
- 2. I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") and each of them from any loss, liability, damage, or cost that I may incur due to my/my child's presence, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA.
- 3. I ACKNOWLEDGE THAT PARTICIPATING IN YMCA ACTIVITIES INVOLVES KNOWN AND UNANTICIPATED RISKS WHICH COULD RESULT IN PHYSICAL OR EMOTIONAL INJURY, PARALYSIS OR PERMANENT DISABILITY, DEATH, AND PROPERTY DAMAGE. I HEREBY ASSUME FULL RESPONSIBILITY FOR THE RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE or loss while in, about, or upon the premises of the YMCA or location of a program affiliated with the YMCA and release, waive, and covenant not to sue the releasees. Risks include, but are not limited to, broken bones, torn ligaments, or other injuries as a result of falls or contact with participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical emergencies resulting from physical activity; and damaged, lost or stolen property. I understand such risks cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
- 4. I HEREBY AGREE THAT MY/MY CHILD'S PARTICIPATION IN THESE ACTIVITIES IS VOLUNTARY AND WE ELECT TO PARTICIPATE DESPITE THE RISKS. If at anytime I believe that event conditions are unsafe or that I or my child is unable to participate due to physical/mental conditions, I will immediately discontinue participation.
- 5. I REPRESENT THAT I HAVE ADEQUATE INSURANCE TO COVER ANY INJURY OR DAMAGE I OR MY CHILD MAY SUFFER OR CAUSE WHILE PARTICIPATING IN THIS ACTIVITY, or else I agree to bear the costs of such injury or damage myself.
- 6. I HEREBY AGREE THAT THE YMCA MAY PHOTOGRAGH OR CAPTURE FOOTAGE OF ME OR MY CHILD AT THE YMCA OR ON ANY AFFILIATED YMCA PROPERTY AND the YMCA may use those photographs or footage for its marketing purposes and further agree to release both the YMCA and releasees from any claim or liability related to that use; waiving all claims for myself, my child and any heirs or next of kin.
- 7. I HEREBY AGREE THAT IN THE EVENT THAT I/MY CHILD NEED IMMEDIATE MEDICAL ATTENTION FOR INJURIES THAT OCCUR WHILE PARTICIPATING IN A YMCA PROGRAM, and I am not present or able to communicate my desires at the time of injury, I authorize YMCA staff to give me or my child reasonable first aid, and to arrange transport myself or my child to a heath care facility for emergency care as needed.
- 8. I GIVE PERMISSION FOR MYSELF AND/OR MY CHILD TO BE TRANSPORTED BY THE YMCA as needed for field trips, inclement weather, or late pick-up.

I expressly agree that this RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the States of North Carolina and South Carolina and that if any portion thereof is held invalid the remaining portions shall remain in full legal force and effect.

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	IE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further ements, or inducement apart from the foregoing written agreement have been
Family Representative Signature	
Printed Name	