

**2018  
Camp Fitch YMCA  
Summer Camp  
Registration Form**

- Complete the application indicating which programs your child is enrolling.
  - Mail to: Camp Fitch YMCA  
12600 Abels Rd  
North Springfield, PA 16430
  - Questions? Visit us at [www.campfitchymca.org](http://www.campfitchymca.org) or phone 877.863.4824
- Email a pdf: [info@campfitchymca.org](mailto:info@campfitchymca.org)  
Fax to: 814.922.7000

**Please tell us how you first learned about Camp Fitch:**

- From a friend \_\_\_\_\_
- Through the web site
- Relative attended previously
- Outdoor Education Program
- Parent/Child Program
- YMCA
- Brochure

Camper Name: \_\_\_\_\_ Preferred nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: ( ) \_\_\_\_\_ Circle one: home cell work

Gender: \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade 18/19: \_\_\_\_\_

Please tell us with whom the child lives:

Adult #1 Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
Adult #1 - \_\_\_ Parent \_\_\_ Step Parent \_\_\_ Guardian \_\_\_ Other - \_\_\_\_\_

Adult #2 Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
Adult #2 - \_\_\_ Parent \_\_\_ Step Parent \_\_\_ Guardian \_\_\_ Other - \_\_\_\_\_

Request same Cabent as: \_\_\_\_\_

Check session(s) desired	Session 1 June 10-16	Session 2 June 17 - 23	Session 3 June 24 -30	Session 4 July 1 - 7	Session 5 July 8 - 14	Session 6 July 15 - 21	Session 7 July 22 - 28
Flagship Experience \$655 Ages 6-16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equestrian Focus \$785 Ages 11-15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LIT \$685 Age 15	<input type="checkbox"/> Red		<input type="checkbox"/> White		<input type="checkbox"/> Blue		<input type="checkbox"/> Yellow
CIT (2 week session) \$715 Age 16	Please visit our website or call Camp Fitch about Counselor In Training dates and availability						
Computer Focus 1 week \$845 2 weeks \$1465 Ages 8-16	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> 2 Weeks						
Focus Experiences \$655 Ages 8-16	<input type="checkbox"/> Swim Focus						<input type="checkbox"/> Diabetes Health Focus

A \$75.00 deposit must accompany each application for each week, which is **non-refundable and non-transferable**, but is applied to the total fee. Please make checks payable to Camp Fitch YMCA. Credit card transactions post as "YMCA Youngstown OH".

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Total Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

**Parent Packet:** A complete parent packet information guide will be e-mailed to you in late spring or shortly after you register. This will include a health form that must be signed by a doctor, horseback information, and other needed forms.

**Transportation:** Transportation to and from Camp Fitch is the responsibility of the camper.

**Payment Balance:** Fees and Spending money must be paid by May 1, 2018.

**Spending Money:** Spending money is deposited in an account for horseback riding, crafts, and camp store items. The parent information booklet will give further details.

**Financial Assistance:** Applications for partial scholarships may be requested by calling the Camp Fitch office at: 877.863.4824

**Family Camp:** To register for a week long Family Camp in August call 877.863.4824