

LAKE GENEVA YOUTH CAMP 2018

BEST TO BETTER

2018 REGISTRATION

REGISTRATION FORM

Online: www.lgyc.org **Fax:** 262.248.5511

Mail: LGYC Camper Registrations
W2655 South St. • Lake Geneva, WI 53147

This will be my _____ year at LGYC.

I'll be working on the following patch:

- N/A PAPOOSE (primary camp only) INDIAN (1st time campers)
- SCOUT WARRIOR EAGLE COUNCILMAN CHIEF

GENERAL CAMPER INFO:

| CAMPER NAME | LAST NAME | FIRST NAME | MIDDLE INITIAL |
|-------------|-----------|------------|----------------|
|-------------|-----------|------------|----------------|

| ADDRESS | CITY | STATE | ZIP |
|---------|------|-------|-----|
|---------|------|-------|-----|

| HOME PHONE | CAMPER EMAIL |
|------------|--------------|
|------------|--------------|

| GRADE ENTERING (Fall of '18) | DATE OF BIRTH | AGE | GENDER: F / M BUNK |
|------------------------------|---------------|-----|--------------------|
|------------------------------|---------------|-----|--------------------|

BUDDIES (up to 2) Buddies must be your age & also request your name. We'll do our best but can't guarantee your request.

| NAME 1 | NAME 2 |
|-----------------------|-----------------------|
| FIRST NAME, LAST NAME | FIRST NAME, LAST NAME |

PARENT/GUARDIAN INFO:

NAME

EMAIL
(required for communication purposes)

| PHONE | MOM'S WORK # | DAD'S WORK # | MOM'S CELL # | DAD'S CELL # |
|-------|--------------|--------------|--------------|--------------|
|-------|--------------|--------------|--------------|--------------|

HOW YOU HEARD ABOUT LGYC?

NAME OF CHURCH (if applicable)

NAME OF ALL ADULTS PERMITTED TO PICK UP CAMPER:

By registering I give Lake Geneva Youth Camp (LGYC) the right and permission to use any photographs or video taken of my child at camp for LGYC promotional purposes.

HOLD HARMLESS & LIABILITY RELEASE: I give permission for emergency medical treatment of my child. I give permission for medical transport of my child. I understand that my camper may choose to participate in certain recreational activities that involve a potential risk of serious injury or death. These activities may include, but are not limited to, the climbing wall, giant swing, zip line, and banana boat. I understand that my camper's participation is entirely voluntary and I hereby voluntarily release, hold harmless, and forever discharge Lake Geneva Youth Camp and its trustees, officers, agents, employees, representatives, executors, and successors of all of the above, on behalf of myself and my successors and assigns, from any and all liability for injuries or damages the camper may incur in connection with or arising out of my participation at the Lake Geneva Youth Camp. I hereby give my informed consent for my camper to participate in all camp activities with the exception of the following:

| | | |
|---|--|------|
| X | Required signature of parent or legal guardian for those under 18. | DATE |
|---|--|------|

| | | |
|---|-------------------|------|
| X | Camper signature. | DATE |
|---|-------------------|------|

Check #

Balance

Payment

Spons./Disc.

Total Due

OFFICE USE ONLY : Date

CAMP SESSIONS AND PRICES

Check appropriate box.

P-Paintball

B-Bike Trip

W-Waterski/Wake Board

| CAMP | Grades | DATES | Total | P:\$7 | B:\$15 | W:\$15/day |
|--|--------|-------------------|-------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> JR. GIRLS | 3-6 | July 8 - July 14 | 539 | | | |
| <input type="checkbox"/> JR. HIGH GIRLS | 6-9 | July 8 - July 14 | 569 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> JR. COED | 3-6 | July 22 - July 28 | 539 | | <input type="checkbox"/> | |
| <input type="checkbox"/> PRIMARY CAMP | 1-3 | July 1 - July 4 | 279 | | | |
| <input type="checkbox"/> JR. BOYS | 3-6 | July 15 - July 21 | 539 | | | |
| <input type="checkbox"/> JR. HIGH BOYS | 6-9 | July 15 - July 21 | 569 | | <input type="checkbox"/> | |
| <input type="checkbox"/> JR. HIGH COED | 6-9 | July 22 - July 28 | 569 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> TEEN CAMP | 9-13 | July 29 - Aug 4 | 599 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Teen Leadership | 9-13 | July 15 - Aug 4 | 999 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DAY CAMP WEEK (s) for grades K - 6

- DC:1 June 11-15
- DC:2 June 18-22
- DC:3 June 25-29
- DC:4 July 2-3, 5-6 (four days only)
- DC:5 July 9 - 13
- DC:6 July 16-20
- DC:7 July 23-27
- DC:8 Jul 30 - August 3
- DC:9 August 6-10
- DC:10 August 13-17

Calculate day Camp Cost:

_____ x \$ 180/week
 _____ x \$ 25/week extended stay
 _____ x \$15/week daily meal plan
 _____ x \$50/day
 _____ x \$10/day extended stay
 _____ x \$5/daily meal plan

circle days attending: M T W T H F

VAL PAKS detailed information on website

- Camp Video (Digital) 12.00
- All Camp Photo 7.00
- Camp theme t-shirt 12.00
- Val Pak I (video & photo) 17.00
- Val Pak II (video & tee shirt) 21.00
- Val Pak III (t-shirt & photo) 17.00
- Super Val Pak (video, photo & t-shirt) 27.00

FOR MORE INFORMATION ON PAINTBALL, WATERSKIING, BIKE TRIPS & EXTENDED STAYS FOR DAY CAMP, VISIT OUR WEBSITE: www.lgyc.org

T-SHIRT SIZE please circle

YOUTH:

ADULT:

CAMP BANK (OPTIONAL) SPENDING ACCOUNT FOR CAMPER USE AT THE Canteen, Handcraft, Paintball or Laser (must be in \$5 increments)

PROMOTIONS

- SIBLING DISCOUNT \$50 (DAY CAMP 10, PRIMARY 25)
- 2ND WEEK OF CLASSIC CAMP \$100 (DAY CAMP 10)
- BRING-A-FRIEND \$100 (LIST FRIENDS BELOW. FIRST TIME CAMPERS ONLY)

DAY CAMP BAF \$10

FRIENDS: _____

only one promotion/discount per camper

PAYMENT INFO (payment is due 2 weeks prior to camp start date)

DEPOSIT \$100 for week-long camps \$25 for Day Camp

Payment Method: please circle **VISA MASTERCARD DISCOVER AEXP CHECK**

CHECK/MONEY ORDER # _____ TOTAL AMT TO BE CHARGED \$ _____

CARD # _____ EXP DATE _____ SECURITY CODE _____

NAME ON CARD _____ SIGNATURE _____

ADDRESS OF CARD HOLDER _____

CAMPER SPONSORSHIPS AVAILABLE ON NEED BASIS. SEE WEB FOR APPLICATION.

Mail to : LGYC W2655 South Street Lake Geneva, WI 53147 262-248-5500 www.lgyc.org