



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# ADD FORM: Summer Camp 2017

## YMCA OF GREATER WILLIAMSON COUNTY

Date: \_\_\_\_\_

Camper Name: \_\_\_\_\_ Camper D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home/Mobile Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### PLEASE INDICATE WHICH PROGRAM(S) YOU ARE ADDING BELOW

(For Camp Twin Lakes, skip Section 1 if you are ONLY adding an add-on or lunch and move directly to Section 2 or 3)

Camp Week	Add Deadline	Draft Date
Week 0, May 29-Jun 2	May 24	May 15
Week 1, June 5-9	May 31	
Week 2, June 12-16	June 7	June 1
Week 3, June 19-23	June 14	
Week 4, June 26-30	June 21	June 15
Week 5, July 3-7	June 28	
Week 6, July 10-14	July 5	July 1
Week 7, July 17-21	July 12	
Week 8, July 24-28	July 19	July 15
Week 9 Jul 31- Aug 4	July 26	
Week 10, Aug 7-11	August 2	August 1
Week 11, Aug 14-18	August 9	
Week 12, Aug 21-15	August 16	August 15

#### 1. Camp Information

Are you adding a week of camp?:  Yes  No

If adding, which week?: \_\_\_\_\_

Camp Name: \_\_\_\_\_

#### 2. Add On Information (Camp Twin Lakes & Camp Round Rock ONLY)

Are you adding an add on?:  Yes  No

If adding, which week?: \_\_\_\_\_

Add On Name?: \_\_\_\_\_

#### 3. Lunch Information (Camp Twin Lakes ONLY)

Adding Lunch?:  Yes  No

If adding, which week?: \_\_\_\_\_

INDICATE HERE IF YOU ARE BANK DRAFTING CAMP TUITION:       YES     NO

Note: Must pay full balance if week of camp/add-on/lunch is past the draft date.

#### For Office Use Only

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Amt. Paid: \_\_\_\_\_

Credit Card:      XXXX-XXXX-XXXX-\_\_\_\_\_/Exp.\_\_\_\_\_

Cash: \_\_\_\_\_

Check No.: \_\_\_\_\_

Y LICENSED CHILD CARE

Revised: 1/17/17

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