



**FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

**TRANSFER 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 DROPPING below	transfer to	you are ADDING below
Camp Name:	→	Camp Name:
Camp Week:		Camp Week:
and / or		and / or
Add-on Name:	→	Add-on Name:
Add-on Week:		Add-on Week:
*your \$15 deposit will be lost when dropping/transferring		*must pay \$15 deposit or full weekly fee pending camp start date

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

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	June 15
Week 4, June 26-30	June 21	
Week 5, July 3-7	June 28	July 1
Week 6, July 10-14	July 5	
Week 7, July 17-21	July 12	July 15
Week 8, July 24-28	July 19	
Week 9 Jul 31- Aug 4	July 26	August 1
Week 10, Aug 7-11	August 2	
Week 11, Aug 14-18	August 9	August 15
Week 12, Aug 21-15	August 16	

**For Office Use Only**

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

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

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

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

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

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

**Y LICENSED CHILD CARE**

1812 N. Mays Street, Round Rock, TX 78664P 512 615 5563 • ymcagwc.org

Revised: 1/30/17