

YMCA CAMP LAKEWOOD FAMILY CAMP 2020 REGISTRATION FORM

September 3 - 7, 2020

First Name: _____ Last Name: _____ Are you a Y member? yes no
(membership not required)

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Please list below the names and birthdates (mm/dd/yyyy) of your family members (No birthdate needed for 18+)

Name: _____ Birth Date: _____ Name: _____ Birth Date: _____

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Do you/your children have any food allergies that we need to know? If so, please list: _____

Emergency contact information (Please do not list someone who is with you at Camp Lakewood for the weekend.)

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Advanced Sign-Up Activities (There will be many other activities planned which do not require an advanced sign-up)

Mark off the advanced sign-up activities you would like to participate in while you are here. Please put your family members' name(s) next to the activity. Please note age restrictions for some of the activities.

Mud Cave (8+) Names: _____

Pines Peak (5+) Names: _____

Pines Pole Zip (8+) Names: _____

Riflery (10+) Names: _____

Additional (extra charge) activities. See next page for cost.

Alpine Tower (10+) Names: _____

Tie Dye Shirt (all ages) Names: _____

Valley Trail Ride (7+) Names: _____

Wagon Ride (all ages) Names: _____

Water Blast Zip (8+) Names: _____

Registration Fee (includes lodging, meals and all free activities)				
# People 5+ (\$ 165 per person)		# Kids 0-4 (Free)		Registration Total
_____		_____		\$ _____
Additional Activities (optional activities below have an additional fee. Complete those you want to participate in)				
Activity	Age Requirement	Cost	# People	Activity Total
Alpine Tower	10+	\$10	_____	\$ _____
Trail Ride	7+	\$25	_____	\$ _____
Wagon Ride	All	\$4	_____	\$ _____
Water Blast Zip	8+	\$10	_____	\$ _____
Tie Dye	All	\$10 child	_____	\$ _____
		\$11 adult	_____	\$ _____
	(must be 100% cotton)	\$5 bring own shirt	_____	\$ _____
Activity Grand Total				\$ _____
Total Amount Due (Registration & Activities)				\$ _____

Payment Information

Check enclosed (payable to YMCA of the Ozarks)

Please contact me for my credit card information

Preferred Daytime Phone #: _____

I have read and agree to the Rules and Policies as outlined in the Family Camp booklet.

Signature (Required): _____ **Date:** _____

Please return completed forms to:

Mail: Outdoor Education Department, YMCA Camp Lakewood
13528 Highway AA, Potosi, MO 63664

Fax: 573-438-3913

E-Mail: outdooreducation@gwrymca.org

Questions?

Call: 888-386-9622 ext. 232