



# How did you learn about Camp Manito-wish YMCA?

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Are you a Camp Manito-wish YMCA alum?  No  Yes

If yes, what was your last name when you were a camper? \_\_\_\_\_

**PAYMENT OPTIONS:**

**Check**  
Please make checks payable to **Camp Manito-wish YMCA**

**Credit Card**  
Charge my  VISA  Mastercard CSV \_\_\_\_\_  
(three digits on the back of card)

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Name on Card \_\_\_\_\_  
Cardholder address (if different from primary contact) \_\_\_\_\_  
\_\_\_\_\_

*I hereby give permission to use any video, photographs, or written statements from my family's experience in public relations materials, including the internet, without compensation.*

**IN CASE OF MEDICAL OR SURGICAL EMERGENCY, I accept responsibility for medical/surgical treatment charges which may be incurred on my personal/my child's/my family's behalf.**

**Cancellation policy:** *I understand that in the event of my cancellation within 21 days of the program, Camp Manito-wish YMCA will retain the full fee. Cancellation on my part within 22-60 days of the program will result in Camp Manito-wish retaining 50% of the program fee. For any cancellation more than 60 days before a program, Camp Manito-wish will retain 25% of the program fee.*

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**Signature** **Date**

**Thank you! You will be receiving a confirmation of your registration soon.**

**Please call (715) 385-2312 with any questions.**

Mail to: **Camp Manito-wish YMCA**  
P.O. Box 246 • Boulder Junction, WI 54512  
OR  
Fax: (715) 385-2461



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