



# 2020 SUMMER CAMP APPLICATION Page 1 of 2

## CAMP MANITO-WISH YMCA SUMMER CAMP

\* Application must be signed and dated (both Cancellation and Waiver statements) to be accepted.

**Please complete and return to:** Camp Manito-wish YMCA  
P.O. Box 246  
Boulder Junction, WI 54512  
Ph: 715.385.2312 • Fax: 715.385.2461  
camp@manito-wish.org

|                    |                  |                             |       |      |  |            |                                   |                                |                 |
|--------------------|------------------|-----------------------------|-------|------|--|------------|-----------------------------------|--------------------------------|-----------------|
| Camper Information | Camper name      |                             | First |      | Middle in.                             | Last       |                                   | Nickname                       |                 |
|                    | Camper birthdate | Month                       | Day   | Year | I am a (check):                        | New camper | Returning                         | for my ___ year at Manito-wish | Cabin last year |
|                    | Primary Address  | Street                      |       |      |  | City       |                                   | State                          | Zip             |
|                    | Contact info     | Phone # (for address above) |       |      | Preferred email (for parent/ guardian) |            | School name and grade (Fall 2020) |                                |                 |

|               |                                     |              |        |        |          |                         |
|---------------|-------------------------------------|--------------|--------|--------|----------|-------------------------|
| Family Status | Camper lives at above address with: | Both parents | Mother | Father | Guardian | Other (please note who) |
|               | Send communication from Camp to:    | Both parents | Mother | Father | Guardian | Other (please note who) |

|                    |                                  |        |     |                           |      |       |                |            |                 |      |  |
|--------------------|----------------------------------|--------|-----|---------------------------|------|-------|----------------|------------|-----------------|------|--|
| Parent/guardian #1 | Name                             |        | Mr. | Ms.                       | Dr.  | First |                | Middle in. | Last            |      |  |
|                    | Are you an alum?                 | Yes    | No  | If yes, your maiden name? |      |       | Your workplace |            | Your profession |      |  |
|                    |                                  | Phone  |     |                           | ( )  | ( )   | ( )            | Work       |                 | Home |  |
|                    | Address if different from camper | Street |     |                           | City |       | State          | Zip        | Country         |      |  |

|                    |                                  |        |     |                           |      |       |                |            |                 |      |  |
|--------------------|----------------------------------|--------|-----|---------------------------|------|-------|----------------|------------|-----------------|------|--|
| Parent/guardian #2 | Name                             |        | Mr. | Ms.                       | Dr.  | First |                | Middle in. | Last            |      |  |
|                    | Are you an alum?                 | Yes    | No  | If yes, your maiden name? |      |       | Your workplace |            | Your profession |      |  |
|                    |                                  | Phone  |     |                           | ( )  | ( )   | ( )            | Work       |                 | Home |  |
|                    | Address if different from camper | Street |     |                           | City |       | State          | Zip        | Country         |      |  |

|        |                             |                               |                        |   |
|--------|-----------------------------|-------------------------------|------------------------|---|
| Survey | How did you learn about us? | Internet / website — where:   | Camp fair/ads — where: | <b>Must Register by 10/31/19</b> HAND DEL |
|        |                             | Information night — where:    | Military — where:      | <b>Indicate sweatshirt size</b> MAILED    |
|        |                             | Friend, family, school — who: | Other — who or what:   | <b>YL AS AM AL AXL</b>                    |

| Summer Camp Session Options  | Select here     | Session and Duration  | Eligibility  | Session Dates  |                                |
|--|-----------------|---|--|--|--------------------------------|
|  | BOYS Sessions*  |   | 1 <sup>st</sup> Two-week session                               | Entering 5 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020   | June 16 (Tue) – June 29 (Mon)  |
|  |                 |   | 2 <sup>nd</sup> Two-week session                               |  | July 1 (Wed) – July 14 (Tue)   |
|  |                 |   | Four-week session  | Entering 8 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020   | June 16 (Tue) – July 14 (Tue)  |
|  | Select here     | Session and Duration  | Eligibility  | Session Dates  |                                |
|  | GIRLS Sessions* |   | 1 <sup>st</sup> Two-week session                               | Entering 5 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020   | July 17 (Fri) – July 30 (Thur) |
|  |                 | 2 <sup>nd</sup> Two-week session  | August 1 (Sat) – Aug 14 (Fri)                                  |  |                                |
|  |                 | Four-week session   | Entering 8 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020 | July 17 (Fri) – Aug 14 (Fri)   |                                |
| * Campers may enroll in more than one session. All campers participate in a wilderness trip. Most will take a canoe trip of appropriate length and challenge. Backpacking and sea kayaking options are also available as camper's progress through the program. These alternate trip options fill as campers are accepted. |                 |   |  |  |                                |
| Select here  | Trip            | Duration  | Eligibility  |  |                                |
| Alternate Trip Options   |                 | North Country Trail for 8 <sup>th</sup> Grade and Porcupine Mountain backpacking for 9 <sup>th</sup> & 10 <sup>th</sup> | 4-6 nights (2-week campers)                                    | Entering 8 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020   |                                |
|  |                 |   | 6-7 nights (4-week campers)                                    |  |                                |
|  |                 | Sea Kayaking  | 5-7 nights   | Entering 9 <sup>th</sup> — 10 <sup>th</sup> grade in fall 2020<br>(must be 14 years old by session start date) |                                |

| Fees            | Fees include staff, <i>all</i> activities, instruction, equipment use, wilderness trip, meals, lodging, and facilities. <b>We are happy to offer our families two fee options.</b> You may choose the <b>actual fee</b> or the <b>adjusted fee</b> . The <b>actual fees</b> reflect the true cost needed to deliver a Manito-wish experience. Because of generous contributions to our Annual Fund Drive and Endowment Funds, we are able to offer families an <b>adjusted fee</b> . Please choose the fee which is most suitable for your family. The fee you choose in no way influences the experience your camper will receive. <b>Please check your selection below.</b> Payment plans and Camperships (financial assistance) are available. Please contact our office for more information. |         |           |         |                 |         |         |           |         |
|-----------------|---|---------|-----------|---------|-----------------|---------|---------|-----------|---------|
| 2-week session: | Actual:   | \$2,360 | Adjusted: | \$2,050 | 4-week session: | Actual: | \$4,915 | Adjusted: | \$4,240 |

| Payment Options | I will pay with: <input type="checkbox"/> VISA® <input type="checkbox"/> MasterCard® <input type="checkbox"/> Check — write check # in space here: _____   |             |                        |     |         |
|-----------------|--|-------------|------------------------|-----|---------|
|                 | I am paying: <input type="checkbox"/> Entire Fee <input type="checkbox"/> Deposit — Deposit minimum is \$400; write amount here: _____   |             |                        |     |         |
|                 | If making a deposit: <input type="checkbox"/> Invoice me for remainder in March <input type="checkbox"/> Charge my card in equal monthly payments thru April (If enrolling after March 1, please contact Camp office.) |             |                        |     |         |
|                 | Card #   | 3-digit CSV | Exp. Date              |     |         |
|                 | Cardholder   |             | Daytime phone          |     |         |
|                 | Billing Address  |             |                        |     |         |
|                 | Street   | City        | State                  | Zip | Country |
|                 | Person financially responsible for camper  |             |                        |     |         |
|                 | Name   | Phone       | Relationship to camper |     |         |
|                 | Primary Address  |             |                        |     |         |
|                 | Street   | City        | State                  | Zip | Country |

|                                    |  |       |
|------------------------------------|--|-------|
| Cancellation & Image Use Agreement | I hereby apply for my child to attend Camp Manito-wish YMCA. Enclosed you will find the <b>required deposit</b> which I understand will be credited toward the camp fee if my child is accepted for enrollment. <b>I agree to pay the total camp fee on or before April 30, 2020. I understand that in the event of cancellation 1)</b> Before February 1, Camp Manito-wish will retain 25% of the full deposit. <b>2)</b> Between February 1 and June 1, Camp Manito-wish will retain the full deposit. <b>3)</b> In the event of cancellation on or after June 1, dismissal due to misconduct, or withdrawal due to homesickness, Camp Manito-wish will retain 100% of the session fee. Camp Manito-wish YMCA recommends the travel and emergency medical protection plan offered through CampDoc's . I understand the terms covering payment of camp fees and hereby give my approval and consent to the application. <b>Photo/image-use information:</b> I hereby give permission to use any video, photographs, or written statements from my child's experience in public relations materials including the internet without compensation.   |       |
|                                    | Parent/Guardian Signature*   | Date* |
| Waiver Information                 | I understand that although Camp Manito-wish YMCA has taken reasonable steps to provide my child with appropriate training, equipment and skilled staff for his/her camp experience, I acknowledge that some inherent risks cannot be eliminated without destroying the unique character of these activities. Such risks include, but are not limited to, those associated with canoeing, portaging, backpacking, sea kayaking, waterfront activities, horseback riding, wildlife, vehicle transportation, and other components of the camp experience and wilderness travel. Aware of the risks and willing to assume them, I hereby waive, release and agree to hold harmless the Camp Manito-wish YMCA Inc., their representatives and successors for all claims or liabilities of any kind arising out of my child's participation in this camp experience. I have read the descriptions of the session, understand the requirements for participation, and give my child permission to participate. I assume and accept full responsibility for his/her participation. <b>IN CASE OF SURGICAL EMERGENCY,</b> I hereby give my permission to the physician selected by the Camp administration to hospitalize, secure proper treatment for, and order injection, anesthesia or surgery for my child. I accept responsibility for medical/surgical treatment charges which may be incurred on my child's behalf. |       |
|                                    | Parent/Guardian Signature*   | Date* |

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