

## YMCA SOUTHCOAST 2025 SUMMER CAMP REGISTRATION FORM

One form per-child, please print clearly. MUST be completed and returned to the Camp of your choosing. Registration is not complete, and children will not be permitted to attend camp until required documentation and forms are received. Once registered, parents/guardians will receive additional forms via email through a platform called Playerspace.

## CAMPER

IRST NAME LAST NAME						
○ MALE ○ FEMALE ○ NON-BINARY PRONOUNS ○ HE/HIS ○ SHE/HER ○ THEY/THEM OTHER						
RACE/ETHNICITY O ASIAN/PACIFIC ISLAN	DER 🔿 BLACK/AFRICAN AME	$\operatorname{erican} \bigcirc$ American India	N/ALASKA NATIVE 🔿 BI-RACIAL			
⊖ HISPANIC/LATINO	○ WHITE/CAUCASIAN					
D.O.B/ PHONE		_ AGE AS OF 7/1/2025	GRADE AS OF 9/1/2025			
ADDRESS	CITY	STATE	ZIP			
PRESCRIBED MEDICATIONS/ALLERGIES						
DIAGNOSES/CONDITIONS						
REQUIRES MEDICATION TO BE TAKEN AT CA	MP (i.e. EPI PEN, INHALER, ET	С.) 🔿 YES 🔿 NO				
IF YES, WHAT MEDICATION/S						
PLEASE DESCRIBE ANY OTHER CONCERNS ( MORE SUCCESSFUL AT CAMP.	OR CONSIDERATIONS THAT YO	OU WOULD LIKE US TO KNOW	TO HELP MAKE YOUR CHILD			

## PLEASE CHECK THE FOLLOWING THAT APPLY TO YOUR CHILD (THIS INFORMATION WILL NEED TO BE UPLOADED TO PLAYERSPACE)

◯ HAS IEP, 504, OR BEHAVIOR PLAN AT SCHOOL ◯ CURRENT CUSTODY AGREEMENTS

SESSION	FREDERICK DOUGLASS	MASSASOIT	METACOMET	NEP-IN-NAE	QUEQUECHAN	WEETAMOE	TRADITIONAL CAMP	SPECIALTY CAMP
Α	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	0	$\bigcirc$	$\bigcirc$	0
В	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
С	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	O
D	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
E	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
F	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
G	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
н	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
I.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
		ARRIVAL (see	page 4 for Extende	ed Care times + yr	ncasc.org for Trans	portation informa	ation)	
(	O DROP-OFF	(	EXTENDED C	ARE		ION BUS#	STOP:	
		DEPARTURE (se	e page 4 for Exten	ded Care times +	ymcasc.org for Tran	sportation infor	mation)	
(	O PICK-UP	CK-UP O EXTENDED CARE O TRANSPORTATION BUS# STOP:						

See page 3 for information to select Session Dates, Camp Locations, Specialty Camp offerings.

See reverse side to complete registration.



## YMCA SOUTHCOAST 2025 SUMMER CAMP REGISTRATION FORM

**PRIMARY PARENT/GUARDIAN:** Child will be registered in association with the person listed below and all pertinent information regarding camp will be emailed to this contact. Additional contacts can be added to the child's Playerspace account.

FIRST NAME			LAST NAME		
ADDRESS	(IF DIFFERENT FROM CHILD)	CITY		STATE	ZIP
D.O.B/	PRIMARY EMAIL .			PHONE	

## FINANCIAL AID/STATE SUBSIDY (PLEASE CHECK ONLY IF APPLICABLE)

○ I am applying for Financial Aid (separate form & documentation required)

- I have a PACE Voucher/Contract
- A 3rd Party (DCF, DMH, etc. is paying for camp 3rd party agreement is required to register)

SEE BELOW FOR MORE INFORMATION ABOUT YMCA SOUTHCOAST CAMP FOR ALL FINANCIAL ASSISTANCE, or VISIT: ymcasc.org

## **PAYMENT METHOD** (PLEASE SELECT ONE)

- O Payment in full
- O Deposit only

○ Please use my card on file to schedule payments to come out on due dates\*

\*Sessions A-C: Payment Due 6/1 | Sessions D-F: Payment Due 7/1 | Sessions G-I: Payment Due 8/1

○ Please contact me to schedule a payment plan\*

\*PAYMENT PLANS CAN START AS SOON AS REGISTRATION TAKES PLACE. BALANCE MUST BE PAID IN FULL BY SESSION DUE DATES.

## I ATTEST THAT THE INFORMATION PROVIDED IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

NAME	RELATION TO CAMPER
SIGNATURE	DATE/

YMCA SOUTHCOAST SUMMER CAMPS, LICENSED BY THE MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH (DPH) AND THE LOCAL BOARD OF HEALTH, ARE MANDATED TO UPHOLD ALL THE AGENCIES RULES AND REGULATIONS PERTAINING TO SUMMER CAMP LICENSING. ALL SITES MAINTAIN A COPY OF STATE REGULATIONS FOR PARENTS TO REVIEW UPON REQUEST. PARENTS MAY CONTACT THE CAMP'S LOCAL DEPARTMENT OF PUBLIC HEALTH TO RECEIVE INFORMATION REGARDING THE PROGRAM'S REGULATORY COMPLIANCE WITH BACKGROUND CHECKS, GRIEVANCE, HEALTH CARE AND DISCIPLINE POLICIES.

### **EVERYONE IS WELCOME**

YMCA SOUTHCOAST believes that every individual deserves access to the essentials needed to learn, grow and thrive. The Y welcomes all who wish to participate and believes that no one should be denied access to the Y based on their inability to pay full price. YMCA SOUTHCOAST's Annual Campaign raises funds to support our Camp For All Financial Assistance program, which provides need-based scholarships for Summer Day Camp Programs.

### **COMMITTED TO OUR COMMUNITY**

Determining assistance amounts is handled by the branch in a fair and consistent manner. Every Y member receives the same membership benefits, regardless of whether or not they receive CAMP FOR ALL Financial Assistance. Our members can feel confident knowing that they are part of an organization that cares greatly for the well-being of people and is committed to YOUTH DEVELOPMENT, HEALTHY LIVING and SOCIAL RESPONSIBILITY.

## FOR MORE INFO, CALL:

DARTMOUTH YMCA 508.993.3361 FALL RIVER YMCA 508.675.7841 GLEASON FAMILY YMCA 508.295.9622

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MATTAPOISETT YMCA 508.758.4203 NEW BEDFORD YMCA 508.997.0734 STOICO/FIRSTFED YMCA 508.678.9622



## YMCA SOUTHCOAST 2025 SUMMER CAMP DATES & DETAILS

YMCA Southcoast has been a leading provider of quality day camp programs for 60 years. We pride ourselves on the quality character and caliber of our well-trained camp staff. Our day camp directors have a combined total of 50 years of camp leadership experience. Our counselors and program specialists are carefully selected based on their maturity and proven ability to be positive role models for your child(ren). These counselors and program specialists are not only skilled, but each has a sincere and specific desire to work with, support and guide children.

CAMP SESSIONS *Closed July 4, 2025											
<b>A</b> 6/23-6/27	<b>B</b> * 6/30-7/4	<b>C</b> 7/7-7/11	<b>D</b> 7/14-7/18	<b>E</b> 7/21-7	/25	<b>F</b> 7/28-8/1	<b>G</b> 8/4-8/8	<b>H</b> 8/11-8/15		<b>I</b> 8/18-8/22	
0,25 0,2,			YMCA SOU				0,10,0	0,111	5, 15	0,10 0,22	
	1 2 3   REDERICK DOUGLASS MASSASOIT CAMP METACOMET   NEW BEDFORD YMCA MATTAPOISETT YMCA DARTMOUTH YMCA				4 5 CAMP NEP-IN-NAE CAMP QUEQU GLEASON FAMILY YMCA FALL RIVER						
TRADITION	AL CAMP (M= YMC	ASC Member   PP	= Program Particip	oant)		SESSION		LOCATION			
	AGE 4: M	. \$330   PP. \$38	0		A-I METACOMET, WEE			EETAMOE			
	AGES 5-6:	M. \$330   PP. \$3	380		A-I ALL						
	AGES 7-14:	M. \$305   PP. \$	355			A-I			ALL		
SPECIALTY	CAMPS (M= YMCA	SC Member   PP=	Program Particip	ant)		SESSION			LOCATIO	DN .	
		NOTE: vi	sit ymcasc.org fo	or Specialt	y Camp o	descriptions a	nd details				
ACRO – AGES 8–14   M. \$330   PP. \$380					A, D, G			W	WEETAMOE		
	ART - AGES 9-	14   M. \$330   PI	P. \$380		E			N	NEP-IN-NAE		
	CHEER – AGES 8–14   M. \$330   PP. \$380				B, E, H			W	WEETAMOE		
COUNSEI	COUNSELOR IN TRAINING – AGES 15–16   M. \$795   PP. \$845			45	(7-WEEKS) <b>B-H</b>			MASSAS	MASSASOIT, WEETAMOE		
CRA	AFT LOVERS - AG	5ES 9-14   M. \$3	30   PP. \$380		С, Е			M	METACOMET		
	DANCE - AGES	8–14   M. \$330   I	PP. \$380		C, F, I			W	WEETAMOE		
	DRAMA – AGES	9–14   M. \$330	PP. \$380		D, F			M	METACOMET		
	DRAMA – AGES	9–14   M. \$330	PP. \$380		E			м	MASSASOIT		
FAR	M TO TABLE - A	GES 9–14   M. \$3	45   PP. \$395		E			M	METACOMET		
KAYAK	K – AGES 9–14   M	. \$330   PP. \$38	<b>0</b> (*SWIM TEST)		C, D, E, F, G			м	MASSASOIT		
SAIL	- AGES 9-14   M.	\$690   PP. \$790	(*SWIM TEST)		(2-WEEKS) <b>A-B, C-D, E-F, G-H</b>			М	MASSASOIT		
SAIL EXPLO	ORERS – AGES 9-	14   M. \$345   PF	<b>9. \$395 (</b> *SWIM T	EST)	A, C, E, G			м	MASSASOIT		
EXPL	EXPLORE SCIENCE – AGES 9–14   M. \$330   PP. \$380				D			N	EP-IN-I	NAE	
EXPLORE SCIENCE – AGES 9–14   M. \$330   PP. \$380				C			м	MASSASOIT			
SPORTS – AGES 9–14   M. \$330   PP. \$380				C NEP-IN-NA			NAE				
	EXTENDED C	<b>NRE</b>	LOCAT	ΓΙΟΝ		TRANSPOR	TATION/BUSSIN	G		LOCATION	
NOTE: see	e page 4 for Exte	nded Care time	S		NOTE:	visit ymcasc.o	rg for Bus #s + F	Route Stop	s		
AM: \$60	PER WEEK   PM:	\$40 PER WEEK	AL	L	1-WAY \$40 PER WEEK			2, 3, 5			
BOTI	H AM + PM   \$100	PER WEEK	AL	L	2-WAY   \$80 PER WEEK 2				2, 3, 5		



### **REGISTRATION PROCESS & PLAYERSPACE**

Every camper must enroll by doing so online, or submitting this form:

- Once enrolled, the primary contact will receive an email through Playerspace
- Once in Playerspace, families will be prompted to provide campers information and complete the required forms/ policy sign offs.
- Please be prepared to upload the following documents to Playerspace
  - Immunization Record
  - A current physical within last 18 months
  - IEP or 504 Plan (if applicable)
  - Children with medications to be taken at camp or any special conditions must fill out a medication consent form and/or individual health care plan in addition to registration form to be uploaded in Playerspace.
    Please contact your camp for these forms.

## **PAYMENT POLICY**

A deposit fee of \$50 per session per child is required at the time of registration. The deposit fee is not refundable and cannot be transferred to other sessions, programs, or participants. This deposit is applied toward your total camp fee.

- Tuition for Sessions A-C are due in full on 6/1
- Tuition for Sessions D-F are due in full on 7/1
- Tuition for Sessions G-I are due in full on 8/1

Please note that your child will not be able to attend camp until all the required documents have been submitted and payment in full has been collected by the dates listed above. **If you are a family with a PACE Voucher or receiving Y Financial Aid please reach out to discuss payment expectations.** 

### **PAYMENT OPTIONS**

Weekly payment plans are available. Sign up for electronic payments using your checking account or credit card Contact the respective camp office for more information.

# YMCA SOUTHCOAST 2025 SUMMER CAMP ESSENTIAL INFORMATION

### **CANCELLATIONS, REFUNDS & WITHDRAWALS**

A written four-week notice is required to withdraw your child from camp. Tuition, less than the \$50 deposit, will be refunded. Refunds after the start of the camp sessions are made only if the child has an illness or an injury requiring doctor's care or a note from the physician stating that he/she is unable to participate in camp activities.

Requests for session changes should be submitted at least two weeks prior to the earliest session involved in the change. Approved session changes will result in a \$25 change fee.

### **FINANCIAL ASSISTANCE & STATE SUBSIDIES**

If economic or other family circumstances prevent your child from participating in our camp, please submit the Camp For All Financial Assistance Application and provide supporting documentation to the camp of your choice. <u>Priority will be</u> given in order of which application is received.

### **MULTI-CHILD DISCOUNT**

To thank you for your family's commitment to our camps we offer a 10% discount for each additional child attending the same week from the same household. Families who receive financial aid or other subsidized funds are not eligible for this discount.

#### **CAMP HANDBOOK AND POLICIES**

Please visit **ymcasc.org** or contact camp office for individual handbooks and policies.

#### **CAMP HOURS**

Camp hours are 9:00am - 4:00pm

#### **EXTENDED CARE**

Dartmouth YMCA: 7:00-9:00am | 4:00-5:00pm Fall River YMCA: 7:00-9:00am | 4:00-6:00pm Gleason Family YMCA: 7:00-9:00am | 4:00-5:00pm Mattapoisett YMCA: 7:00-9:00am | 4:00-5:00pm New Bedford YMCA: 7:30-9:00am | 4:00-5:30pm Stoico/FIRSTFED YMCA: 7:00-9:00am | 4:00-5:00pm

### **TRANSPORTATION/BUSSING**

Transportation is available at Camps Massasoit, Metacomet and Quequechan. For bus schedule, visit **ymcasc.org** or contact camp offices.