



# YMCA SOUTHCOAST 2026 SUMMER CAMP ENROLLMENT FORM

One form per-child, please print clearly. MUST be completed and returned to the Camp of your choosing.

## CAMPER

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

MALE  FEMALE  NON-BINARY PRONOUNS  HE/HIS  SHE/HER  THEY/THEM OTHER \_\_\_\_\_

RACE/ETHNICITY  ASIAN/PACIFIC ISLANDER  BLACK/AFRICAN AMERICAN  AMERICAN INDIAN/ALASKA NATIVE  BI-RACIAL  
 HISPANIC/LATINO  WHITE/CAUCASIAN OTHER \_\_\_\_\_

D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ PHONE \_\_\_\_\_ AGE AS OF 7/1/2026 \_\_\_\_\_ GRADE AS OF 9/1/2026 \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PRESCRIBED MEDICATIONS/ALLERGIES \_\_\_\_\_

DIAGNOSES/CONDITIONS \_\_\_\_\_

REQUIRES MEDICATION TO BE TAKEN AT CAMP (i.e. EPI PEN, INHALER, ETC.)  YES  NO

IF YES, WHAT MEDICATION/S \_\_\_\_\_

If your child requires medication while at camp (including emergency medications), additional forms are required. Please contact the camp office to obtain these forms. 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.

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

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

SESSION	FREDERICK DOUGLASS	MASSASOIT	METACOMET	NEP-IN-NAE	QUEQUECHAN	WEETAMOE	TRADITIONAL CAMP	SPECIALTY CAMP
A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ARRIVAL(see page 4 for Extended Care times + ymasc.org for Transportation information)

DROP-OFF  EXTENDED CARE  TRANSPORTATION BUS# \_\_\_\_\_ STOP: \_\_\_\_\_

DEPARTURE(see page 4 for Extended Care times + ymasc.org for Transportation information)

PICK-UP  EXTENDED CARE  TRANSPORTATION BUS# \_\_\_\_\_ STOP: \_\_\_\_\_

See reverse side to complete registration.



# YMCA SOUTHCOAST 2026 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](http://ymcasc.org)

### PAYMENT METHOD (PLEASE SELECT ONE)

- Payment in full
- 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-J: 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	MATTAPOISETT YMCA 508.758.4203	NEW BEDFORD YMCA 508.997.0734	STOICO/FIRSTFED YMCA 508.678.9622
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# YMCA SOUTHCOAST 2026 SUMMER CAMP REGISTRATION FORM

YMCA Southcoast has been a leading provider of quality day camp programs for over 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									
A	B	C	D	E	F	G	H	I	J
6/22-6/26	6/29-7/3	7/6-7/10	7/13-7/17	7/20-7/24	7/27-7/31	8/3-8/7	8/10-8/14	8/17-8/21	8/24-8/28
YMCA SOUTHCOAST CAMP LOCATIONS									
1	2	3	4	5	6				
FREDERICK DOUGLASS NEW BEDFORD YMCA	MASSASOIT MATTAPoisETT YMCA	CAMP METACOMET DARTMOUTH YMCA	CAMP NEP-IN-NAE GLEASON FAMILY YMCA	CAMP QUEQUECHAN FALL RIVER YMCA	CAMP WEETAMOE STOICO/FIRSTFED YMCA				
TRADITIONAL CAMP (M= YMCASC Member   PP= Program Participant)					SESSION			LOCATION	
AGE 4: M \$340   PP \$390					A-J			* METACOMET, WEETAMOE	
AGES 5-6: M \$340   PP \$390					A-J			ALL	
AGES 7-14: M \$315   PP \$365					A-J			ALL	
SPECIALTY CAMPS (M= YMCASC Member   PP= Program Participant)					SESSION			LOCATION	
NOTE: visit ymcasc.org for Specialty Camp descriptions and details									
COUNSELOR IN TRAINING - AGES 15-16   M \$820   PP \$870					(7-WEEKS) B-H			MASSASOIT, METACOMET, WEETAMOE	
CRAFT LOVERS - AGES 9-14   M \$340   PP \$390					E			MASSASOIT	
EXPLORE SCIENCE - AGES 9-14   M \$340   PP \$390					C			MASSASOIT	
KAYAK - AGES 9-14   M \$340   PP \$390 (*SWIM TEST)					C-G			MASSASOIT	
SAIL - AGES 8-14   M \$710   PP \$910 (*SWIM TEST)					(2-WEEKS) A-B, C-D, E-F, G-H			MASSASOIT	
THE ULTIMATE ATHLETE - AGES 9-14   M \$340   PP \$390					D			MASSASOIT	
CRAFT LOVERS - AGES 9-14   M \$340   PP \$390					C			METACOMET	
DRAMA - AGES 9-14   M \$340   PP \$390					D			METACOMET	
FARM TO TABLE - AGES 9-14   M \$355   PP \$405					E			METACOMET	
ACRO - AGES 8-14   M \$340   PP \$390					A,D,G			WEETAMOE	
CHEER - AGES 8-14   M \$340   PP \$390					B,E,H			WEETAMOE	
DANCE - AGES 8-14   M \$340   PP \$390					C,F,I			WEETAMOE	
ART- AGES 9-14   M \$340   PP \$390					E			NEP-IN-NAE	
EXPLORE SCIENCE- AGES 9-14   M \$340   PP \$390					D			NEP-IN-NAE	
SPORTS - AGES 9-14   M \$340   PP \$390					C			NEP-IN-NAE	
EXTENDED CARE			LOCATION		TRANSPORTATION/BUSSING			LOCATION	
NOTE: see page 4 for Extended Care times									
NOTE: visit ymcasc.org for Bus #s + Route Stops									
AM: \$60 PER WEEK   PM: \$40 PER WEEK			ALL		1-WAY   \$40 PER WEEK			2, 3, 5	
BOTH AM + PM   \$100 PER WEEK			ALL		2-WAY   \$80 PER WEEK			2, 3, 5	

\* **NO AGE 4** during Session J at Metacomet  
**No bussing** during Session J at Metacomet

### REGISTRATION PROCESS & PLAYERSPACE

**Every camper must enroll online or by 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-J 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 up to payment due dates. Sign up for electronic payments using your checking account or credit card. Contact the respective camp office for more 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. Priority will be 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](http://ymcasc.org) or contact your 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](http://ymcasc.org) or contact camp offices.