



eliminating racism
empowering women
ywca
greenwich

YWCA GREENWICH CAMP TAYITO 2024

(Kindergarten – Preteen)
Registration Form

Camp Dates (please check):

_____ Session I (4 Weeks) June 24 - July 19 _____ Session II (4 Weeks) July 22 - August 16
(NO CAMP – THURSDAY 7/4)

Camp Hours & Fees (check all that apply):

Camp meets Monday through Friday:

_____ 9:00 am - 4:30 pm Regular Hours \$2100 per session
_____ 7:30 am - 9:00 am Early Care Hours \$185 per session
_____ 4:30 pm - 6:00 pm Extended Care Hours \$185 per session

**** EARLY REGISTRATION DISCOUNT – \$200 discount off session price for each full session registered by FEBRUARY 29, 2024****

Membership requirements: All camp participants must be a YWCA Greenwich member. If your child is not already a YWCA Greenwich member, you must pay the membership at the time of registration. *The cost of a child's summer membership is \$75.00; an annual affiliate membership is \$100.00.*

TO REGISTER: Complete this form and send with payment to the Office of Youth Programs (\$850.00 for a session deposit; \$1700.00 if registering for both sessions); *if your child is not a current member of the YWCA Greenwich, please add cost for membership desired.* (CHECKS SHOULD BE MADE PAYABLE TO YWCA GREENWICH) All deposits are non-refundable and non-transferable. **NO SPACES WILL BE HELD WITHOUT A DEPOSIT.** The deposit will be applied toward the camp fee. Upon completion of registration, notification of the balance due will be emailed to you.

Camp balances are due as follows: Session I on June 1st and Session II on July 1st;
registrations received after the due dates, full balance amount is required.

There will be no refunds or credits for deposits or membership fees due to unavoidable circumstances (e.g., illness, change of vacation plans, moving, and inclement weather)

Child's Name _____ Birth date _____ Female _____ Male _____

2023-2024 SCHOOL YEAR GRADE _____ **School** _____

Parent/Guardian _____ **Home Phone** _____

Home Address _____
City _____ state _____ zip _____

Work Phone _____ **Cell Phone** _____ **Email** _____

Is there 1 friend attending camp that you want your child placed in a group with? N / Y Name of friend: _____

Child's T-shirt size Youth sizes Adult sizes
YS YM YL S M L XL

I understand and agree to the terms of this Registration Contract, as stated above:

YWCA GREENWICH
CHILDHOOD
EDUCATION
DEPARTMENT



Signature of Parent/Legal Guardian

Date

259 East Putnam Avenue, Greenwich, CT 06830 | p 203 869-6501 | a.smith@ywcagreenwich.org | ywcagreenwich.org

OFFICE OF
YOUTH
PROGRAMS





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Domestic Abuse Services

YWCA of Greenwich

Credit Card Authorization Form

Name of Child: _____

Type of Credit Card: _____

Visa

MasterCard

Credit Card Number: _____

Expiration Date: _____

Name as it Appears on Card: _____

Billing Address: _____

Billing City/State/Zip: _____

Purpose of Charge: _____

Amount: _____

Signature _____

Date: _____

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Yes, please keep this credit card on file for future charges.