

YMCA Camp Ihduhapi Yukon Days Registration Form



Name: _____ Male _____ Female _____

Date of Birth: _____ Age: _____ Home Phone: _____

Address: _____ City/State/Zip: _____

Parent #1 Name: _____ Parent Date of Birth: _____

Parent #1 Phone: _____ Alternate Phone: _____

Parent #2 Name: _____ Parent Date of Birth: _____

Parent #2 Phone: _____ Alternate Phone: _____

Health Insurance Carrier: _____ Policy #: _____

Friends I would like to be with: _____

Payment Information: Enclosed is a non-refundable full payment of \$90 for Yukon Days at YMCA Camp Ihduhapi to hold my reservation. Payment must be paid in full at time of registration.

Check made payable to YMCA Camp Ihduhapi for \$90

Please bill my : Visa Mastercard Discover Card American Express
Amount: \$90

**Send Registration to:
YMCA Business Center
2125 E. Hennepin Ave.
Suite 100
Mpls, MN 55413**

Card Number: _____ Exp. Date: _____

Signature: _____

Note: Transportation is not provided by YMCA Camp Ihduhapi. Please arrange transportation for your child to and from Camp Ihduhapi.

This section must be signed by a parent or guardian of camper before registration can be accepted.

I wish to enroll my child in the session of YMCA Camp Ihduhapi as noted and agree to pay all camp fees at time of registration. I understand that in the event of cancellation, dismissal or withdrawal on account of homesickness, misconduct, failure to abide by YMCA Code of Conduct, or any other cause except illness requiring the attention of a physician, payment of camp fees will not be refunded.

Waiver of Liability and Release of Indemnification

I understand that although The Young Men's Christian Association of Metropolitan Minneapolis (referred to as YMCA) and Camp Ihduhapi have taken reasonable steps to provide my child with appropriate training, equipment and skilled staff for hi/her outdoor experience, I acknowledge that the inherent risks cannot be eliminated without destroying the unique character of this activity. Such risks include, but are not limited to those associated with, horseback riding, high ropes courses, climbing, waterskiing, tubing or other activities that involve inherent risk.

Aware of these risks and willing to assume them, I hereby waive release and agree to hold harmless the YMCA and Camp Ihduhapi and their representatives and successors for all claims or liabilities of any kind arising out of my child's participation in this camping experience. I have read the descriptions of the session, understand requirements for participation, and give my child permission to participate. I assume and accept full responsibility for his/her participation.

I understand that the YMCA and Camp Ihduhapi assumes no responsibility for injuries or illnesses which my child may sustain as a result of any physical condition or resulting from participation in any camp activities or experiences. I expressly acknowledge on behalf of myself and my child and heirs that I assume the risk for any and all injuries and illnesses which may result from my child's participation in these activities.

In the event that my child needs immediate medical attention for injuries received while participating in the YMCA program, I authorize the YMCA and Camp Ihduhapi staff to give my child reasonable first aid and to arrange transport of my child to a health care facility for medical services, as needed. My child has my permission to be transported by the YMCA and Camp Ihduhapi to and from any field trips, organized activities and/or time on the trail. I authorize the YMCA and Camp Ihduhapi staff to administer syrup of ipecac when instructed to do so by a poison control center. If my child requires use and administration of an epi-pen, it is my responsibility to ensure that the epi-pen is on my child or within their personal belongings everyday of the program. If YMCA or Camp Ihduhapi staff is required to administer and use the epi-pen that I agree to forever release and discharge the YMCA and its' directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen. I hereby acknowledge that the YMCA and Camp Ihduhapi will assume that either parent of the child may pick up the child at any time during the program unless there is a pertinent court documentation on -file at the YMCA and Camp Ihduhapi that indicates otherwise. Finally, I hereby release all pictures of my child taken by the YMCA and Camp Ihduhapi for promotional purposes and programming materials, including the YMCA and Camp Ihduhapi website.

Signature: _____ Date: _____
Parent/Guardian