



# YMCA Camp Duncan Kids Day Out Program

YMCA Camp Duncan offers a wonderful opportunity for kids ages 4 thru 8th grade to be outside and active during their days off school. Our school year program meets in the Main Lodge and offers a variety of activities. Check your child's school calendar and choose the dates that work with your schedule.

**Rate:**

\$52/day \*includes all activities

**Hours:**

Program runs from 8:30 a.m.-4:00 p.m.  
Extended care available at no extra cost  
from 6:30 a.m.-6:00 p.m.

**Location:**

Main Lodge  
32405 N. Hwy 12  
Ingleside, IL 60041

**What to Bring:**

Snack, sack lunch, and weather appropriate clothing. Please have your child wear gym shoes.

**Activities:**

Games, Arts and Crafts, Hiking, Archery, Adventure Programs, and MUCH MORE!

**Questions:**

Contact the Camp Duncan office  
847-546-8086 or [smelton@ymcachicago.org](mailto:smelton@ymcachicago.org)

**To Register:**

Visit [www.ymcacampduncan.org](http://www.ymcacampduncan.org) or  
Fill out the registration form on back  
and mail, scan or fax to:  
32405 N. Hwy 12  
Ingleside, IL 60041  
**Fax: 847-546-3550**

## KIDS DAY OUT PROGRAM DATES FOR 2019-2020

- Friday 10/14/19 – Institute Day
- Monday 11/25/19 – Fall Break
- Tuesday 11/26/19 – Fall Break
- Wednesday 11/27/19 – Fall Break
- Monday 12/23/19 – Winter Break
- Thursday 12/26/19 – Winter Break
- Friday 12/27/19 – Winter Break
- Monday 12/30/19 – Winter Break
- Tuesday 12/31/19 – Winter Break
- Thursday 1/2/20 – Winter Break
- Friday 1/3/20 – Winter Break
- Monday 1/20/20 – MLK, Jr. Day
- Friday 2/14/20 – Institute Day
- Monday 2/17/20 – President's Day
- Monday 3/23/20 – Spring Break
- Tuesday 3/24/20 – Spring Break
- Wednesday 3/25/20 – Spring Break
- Thursday 3/26/20 – Spring Break
- Friday 3/27/20 – Spring Break
- Friday 4/10/20 – Institute Day

(PLEASE PRINT)

## 2019-2020 KIDS DAY OUT REGISTRATION

YMCA Camp Duncan, 32405 N. Hwy 12, Ingleside, IL 60041

Phone: (847)546-8086 Fax: (847) 546-3550 E-mail: [smelton@ymcachicago.org](mailto:smelton@ymcachicago.org)

Camper's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Birthdate (Month/Day/Year) \_\_\_\_\_ Age as of 9/1/19 \_\_\_\_\_  Male  Female

School \_\_\_\_\_ Grade at beginning of '19-20' School Year \_\_\_\_\_

Camper's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Camper lives with:  Mother  Father  Both  Guardian Custody Information \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

This camper needs a modification because of a disability to enjoy this program:  Yes  No

How did you hear about us? \_\_\_\_\_

**DATES NEEDED – RATE IS \$52/DAY** Check your child's school calendar and select your desired dates carefully.

1. ___ October 14	5. ___ December 23	9. ___ December 31	13. ___ February 14	17. ___ March 25
2. ___ November 25	6. ___ December 26	10. ___ January 2	14. ___ February 17	18. ___ March 26
3. ___ November 26	7. ___ December 27	11. ___ January 3	15. ___ March 23	19. ___ March 27
4. ___ November 27	8. ___ December 30	12. ___ January 20	16. ___ March 24	20. ___ April 10

**Please return completed registration form with a \$20 NON-REFUNDABLE, NON-TRANSFERABLE deposit per date registered to YMCA Camp Duncan via mail, fax or email. The deposit per date is deducted from the daily balance for each date registered for.**  
YMCA Camp Duncan, 32405 N. Hwy 12, Ingleside, IL 60041 Phone: 847-546-8086 Fax: 847-546-3550 Email: [smelton@ymcachicago.org](mailto:smelton@ymcachicago.org)

YMCA CAMP DUNCAN IS FOR THOSE WHO ENJOY CAMPING. RULES FOR PARTICIPATION IN THE PROGRAM ARE THE SAME FOR EVERYONE WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, SEX OR DISABILITY. IT IS UNDERSTOOD THAT ALL CAMPER'S WILL BE TREATED AS INDIVIDUALS AND RESPECT SHOWN FOR NORMAL DIFFERENCES IN TASTES, PREFERENCES, ABILITIES AND RANGE OF BEHAVIOR PATTERNS. YMCA CAMP DUNCAN RESERVES THE RIGHT TO DISMISS A CHILD FROM THE CAMP WHOSE SPECIAL NEEDS WE ARE NOT ABLE TO MEET OR WHOSE CONDUCT IS NOT IN THE BEST INTEREST OF THE TOTAL CAMP, WITHOUT REFUND.

**PARENT APPROVAL:** I / We approve this application and certify that our child is in good health and will provide a current health history. I hereby give permission to Camp Duncan to administer routine medical care and to the physician selected by the Camp Director to hospitalize, secure proper treatment and to order injection, anesthesia, or surgery for my child as named above. I also give permission for Camp Duncan to transport my child off the camp property for purposes of medical care and program activities as deemed appropriate by the director. Camp Duncan has my permission to use any photographs taken of my child on its annual promotional materials without compensation. Kids Day Out programs must have a minimum of seven campers registered by 12:00pm the business day before the scheduled date in order to be held. Parents will be notified in the event of a program cancellation.

I understand that a non-refundable, non-transferable deposit of \$20.00 per child, per Kids Day Out date is required with registration and that the balance of fees is due no later than check-in of each Kids Day Out day registered for. I also understand that if camp fees are not paid in full and / or required paperwork is not returned by the start of the Kids Day Out day, the prospective camper will not be permitted to participate in any camp programs. The balance of fees is refundable for medical reasons only and will be issued upon receipt of a Doctor's authorized written notice. Cancellations must be made by 12:00pm the day before the scheduled Kids Day Out date. If a cancellation is made after 12:00pm of the day before the scheduled date, participants are responsible for the total balance of fees owed, regardless of attendance. A fee of \$5.00 will be charged for each change made after registration form is received. Camp fees include staff supervision, extended care (6:30am – 6pm), and most program activities.

**FEES DO NOT INCLUDE MEDICAL / ACCIDENT INSURANCE.** The YMCA of Metropolitan Chicago does not carry medical, accident, or loss of personal property insurance for any program participants, due to the fact that it would drastically in-crease the cost of our program fees. Please review the insurance policies that protect you and your family to be certain that the proper coverage is in place. Medical bills incurred are the responsibility of the parent. I understand that no refunds will be issued for campers going home early, for disciplinary action, or home sickness. The YMCA is not responsible for lost, stolen, or damaged personal items. I understand that if my child is sent home for disciplinary reasons I must pick him/her up within 1 hour of being contacted.

I realize if there is any an existing custodial situation regarding guardianship of the child registered above, Camp Duncan staff will only communicate with the parent/guardian who has registered the child and whose signature appears on this registration form. Additionally, Camp Duncan staff will not release any information to anyone who inquires about the above registered camper/child. Camp Duncan will not become involved with situations that arise between custodial parents or situations that arise between non-custodial parents. It is up to the individual(s) that registered the child to share information with any other custodial parent(s)/guardians who may be sharing custody of the above-mentioned child. I understand that my signature indicates that I am in agreement to provide any necessary information, including information required by law or by the custodial agreement, with others that share the custody of the above registered camper. My signature also indicates that the information on this registration form is correct and that I have read and am in agreement with all of the above information.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR CREDIT CARD PAYMENT**  Discover  Visa  Master Card  American Express

Card Holder's Name \_\_\_\_\_ Credit Card Number \_\_\_\_\_

Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_  Charge full fee \$ \_\_\_\_\_  Charge deposit only \$ \_\_\_\_\_

Charge deposit now and automatically charge balance of fees on each date registered for.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_