## MYSTIC LAKE YMCA CAMP SUMMER REGISTRATION FORM

## REGISTER ONLINE • BY PHONE • FAX • IN PERSON • MAIL

Online: www.mysticlakecamp.org • Phone: 517.827.9650 Fax: 989.544.2722

PARENT'S INFORMATION								
Parent's First Name Par			Parent's Last N	arent's Last Name				
Parent's Email Address	•		••••••	•	•			
Street Address					Phone Number			
City				State	State Zip			
Place of Employment/Occupation	••••••	•••••	••••••	······i	• • • • • • • • • • • • • • • • • • • •	···· <del>i</del> ·······		
2nd Parent/Guardian First Name	•••••••••••••••••••••••••••••••••••••••		Last Name	••••••	••••••			
2nd Parent/Guardian Email Address	•••••••••••		•	••••••••	• •• • • • • • • • • • • • • • • • • • •			
Street Address			••••••	Phone Number				
City			••••••	State	• • • • • • • • • • • • • • • • • • • •	Zip		
Place of Employment/Occupation	•••••••	••••••	•••••		••••••	··· <b>-i</b> ··········		
CAMPER'S INFORMATION	_				_			
Camper's First Name	Mi	ddle	Last Na	ame				
Camper's Home Phone	Da	te of Birth/ Age at Camp	••••••	Gender				
Street Address	••••••••••••••••••••••••••••••••••••••		••••••	Phone Nu	mber			
My child attended Mystic Lake Camp in the past: Grade Child is Entering this Fall								
□ yes □ no   If yes, what year Cabin Mate Request (must be same program and age, one request per camper)								
How did you learn about Mystic Lake YN	ICA Camp?		••••••	•••••••••	• •••••••••••••••••••••••••••••			
□ Internet □ Website □ Facebook □	Word of Mouth □ R	adio/TV 🛮 Brochure in mail						
☐ Brochure from								
EMERGENCY CONTACT INFOR	MATION							
Emergency Contact Name & Relationship	to Camper (other th	an parents)						
Emergency Day Phone	••••••	••••••	Emergency Ever	ning Phone	• • • • • • • • • • • • • • • • • • • •			
CHOOSE YOUR CAMP PROGRA	AM					·		
Program			•••••	Week(s)		Camp Fee		
Program				Week(s)		Camp Fee		
SELECT YOUR OPTIONS						1.		
☐ Please accept our donation to the sc	holarship fund		•••••			\$		
☐ Round-Trip Bus Ride					\$50	\$		
☐ Bus Ride Only to Camp				••••••	\$35	\$		
☐ Bus Ride Only from Camp				•••••	\$35	\$		
☐ YMCA Member Discount				••••••••••	\$20 off	- \$		
☐ Sibling Discount (Must have same address)				••••••	\$20 off	- \$		
☐ Camp Store Account					•	\$		
Grand Total of all C				all Camp Fees &	Options	\$		
PAYMENT OPTIONS						2550		
☐ Pay full amount now via check or cred	• • • • • • • • • • • • • • • • • • • •				to inquire 517.827.9	<del>3650</del>		
□ Pay the \$100 non-refundable registra  METHOD OF PAYMENT	ation fee. (Remaining	balance is due 15 days pric	r to campers arri	valJ				
☐ Check ☐ Check No.								
☐ Credit Card ☐ Debit Card	□ Visa □ Master(		can Express	•••••••••	• •••••••••••••••••••••••••••••••••••••			
Name on Card	Card No.	ard No. CVV#:						
I hearby authorize the YMCA of Metropo	olitan Lansing to char	ge my credit card for the cu	rent balance due	Initial:				
I hearby authorize the YMCA of Metropo Signature	olitan Lansing to char	ge my credit card for the cu	rent balance due	Initial:	Exp.			
<b>;</b>						this is your camper's first summer,		