



# YMCA CAMP SURF

## Special Needs Kindred Meeting Registration Form: February 9th-11th

Name \_\_\_\_\_ Camp Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Gender  M  F

Birthdate \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

### Dietary Needs

Are you?  Vegetarian

Do you have food allergies?  Yes  No If yes, please specify \_\_\_\_\_

REGISTRATION	FEE
<input type="checkbox"/> Regular Registration (Sunday Arrival)	\$85
<input type="checkbox"/> Alternate Registration (Monday Arrival)	\$60
<b>Total Registration Fee</b>	\$

### METHOD OF PAYMENT

Check enclosed (payable to YMCA Camp Surf)

Charge \$ \_\_\_\_\_ to my  Visa  MC  AmEx

Card # \_\_\_\_\_

Expiration \_\_\_\_\_ Billing Zip \_\_\_\_\_

Signature \_\_\_\_\_

I do not wish to provide credit card info - Please contact me at the phone number listed above.

### Fee for the weekend includes:

- Shared housing Sunday night through Tuesday morning.
- Meals from Sunday dinner through Tuesday breakfast.
- Participation in meeting activities.

**I understand this fee is non-refundable and non-transferrable less than 10 days prior to the meeting start date.**

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

You will receive a participant info packet by email within 2 weeks of registration with more details, directions and information on what to bring, please contact us if you don't receive it.

### TO REGISTER

Return form to:

YMCA Camp Surf  
560 Silver Strand Blvd.

Imperial Beach, CA. 91932

Or email to: [jmillard@ymca.org](mailto:jmillard@ymca.org)

### QUESTIONS

CONTACT EVENT COORDINATORS

Alexa Donner  
(419) 751.7077  
[specialneedskindred@gmail.com](mailto:specialneedskindred@gmail.com)

Kyle Millard  
(619) 423-5850  
[jmillard@ymca.org](mailto:jmillard@ymca.org)

### FOR OFFICE USE ONLY

Staff Initial \_\_\_\_\_ Date \_\_\_\_\_

Payment received