



YMCA CAMP HI-ROCK 2020 BOLD & GOLD Registration Form

CAMPER INFORMATION (please print clearly)

Camper's Name: _____ Gender: Male Female
DOB(MM/DD/YY): ____/____/____ Grade in Fall 2020: _____ Camper Email: _____
Home Mailing Address: _____
City: _____ State: _____ Zip: _____ Country: _____ Home Phone Number: (____)____-_____

PARENT/GUARDIAN 1 INFORMATION

Parent / Guardian 1 Name _____ Home Phone (____)____-_____
Cell Phone (____)____-_____ Email Address _____
Employer _____ Occupation _____ Work Phone (____)____-_____

PARENT/GUARDIAN 2 INFORMATION

Parent / Guardian 2 Name _____ Home Phone (____)____-_____
Cell Phone (____)____-_____ Email Address _____
Employer _____ Occupation _____ Work Phone (____)____-_____

AUTHORIZED TO PICK UP INFORMATION

It is your responsibility to inform the camp office of anyone authorized to pick up your child. **We will not release campers to anyone without written authorization and photo ID.** If there are any custodial issues of which we should be aware, please inform the camp office in writing. These details will remain confidential but will enable us to act responsibly and within the law. Please have identification available at both check-in and check-out. Changes must be made in writing to camp staff.

Parent/Guardian 1 Authorized to Pick Up Yes No Parent/Guardian 2 Authorized to Pick Up Yes No

Additional Authorized to Pick Up Information (Please list all names and phone numbers of people authorized to pick up your child)

EMERGENCY CONTACTS AND MEDICAL INFORMATION

Once your camper has been enrolled through our online registration system, you will receive access to the Parent Dashboard where you will enter important emergency contact and medical information. Please complete the online and printed forms in a timely manner after receiving your "Confirmation of Registration" email. Campers will not be permitted to remain at camp without the necessary medical information completed. Initial here to acknowledge you have read the above statement _____ (Parent/Guardian Initials)

SURVEY QUESTIONS

How did you **first** hear about us?

Friend/Family* Hi-Rock Website Other Website* A.C.A. Camp Fair* YMCA* Publication* Newspaper* Facebook Instagram
 Other: _____ *Please indicate the name of the above (i.e. which newspaper, YMCA, friend etc.): _____

Camper lives with: Mother Only Father Only Both Parents (Same Household) Both Parents (Separate Households) Guardian Other

Part of our mission at Camp Hi-Rock is to ensure that our camp community represents the diverse communities we serve. In order to measure our efforts, we ask that you answer the following optional question.

Race: White Black/African-American Hispanic/Latino Asian American Indian or Alaskan Native Native Hawaiian or other Pacific Islander
 Two or more races Other: Please Indicate _____

Parent/Guardian Signature: Please sign to indicate that all information above is true and accurate and that you have read the information on **page 3** outlining important information regarding your child's stay at camp.

Sign: _____ Date: _____

YMCA CAMP HI-ROCK

BOLD GOLD 2020

Camp For All - Our YMCA understands families have different abilities to pay for summer camp. We are committed to making the life-changing experience of summer camp available to all. We have adopted a 4-tier pricing program for our summer overnight camp. Please consider the tier descriptions below and choose the tier that is most suitable for your family. No proof of financial need is required for tiers 1 - 3. Your selection is confidential and will not affect your child's experience at camp in any way.

Tier 1 - Most accurately reflects the true cost of backpacking including, but not limited to, staffing, equipment, equipment repair, medical kits, food and transportation costs. If you are able to pay this amount, please do so.	Tier 2 - Reflects the basic cost of attending camp including food, program supplies and limited equipment expenses. This partially subsidized rate is made possible through the efforts of our hardworking volunteers and loyal donors.	Tier 3 - Is a more significantly subsidized rate for families whose children would not otherwise be able to attend camp. It is always our desire to partner with parents in providing a camp experience.	Tier 4 - Is offered to campers with demonstrated need who qualify for financial assistance through our Strong Kids Campership Program.
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Appalachian Trail Hiking Expeditions	Tier 1	Tier 2	Tier 3	Tier 4
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AGES 12-15 (Grades 7-10)				
June 28-July 4 (Week 1A) Movement & Mindfulness - All gender	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
July 19-July 25 (Week 2B) Appalachian Trail Expedition - Boys	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
July 26-August 1 (Week 3A) Appalachian Trail Expedition - Girls	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
			<input type="checkbox"/>	\$873
			<input type="checkbox"/>	\$873
			<input type="checkbox"/>	\$873

Complete
Financial
Assistance
Application

Camp & Hike Trips	Tier 1	Tier 2	Tier 3	Tier 4
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AGES 11-13 (Grades 6-8)				
July 12-July 18 (Week 2A) - Girls	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
August 2-August 8 (Week 3B) - Boys	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
			<input type="checkbox"/>	\$873
			<input type="checkbox"/>	\$873

Complete
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Canoe Expeditions	Tier 1	Tier 2	Tier 3	Tier 4
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AGES 12-15 (Grades 7-10)				
July 12-July 18 (Week 2A) - Boys	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
July 26-August 1 (Week 3A) - Boys	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
August 2-August 8 (Week 3B) - Girls	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
August 16-August 22 (Week 4B) Canoe & Create - All gender	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
			<input type="checkbox"/>	\$873
			<input type="checkbox"/>	\$873

Complete
Financial
Assistance
Application

Advanced Backpacking Adventure Expeditions	Tier 1	Tier 2	Tier 3	Tier 4
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AGES 13-17 (Grades 9-12)				
June 28-July 4 (Week 1A) - Boys	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
July 19-July 25 (Week 2B) - Girls	<input type="checkbox"/>	\$1004	<input type="checkbox"/>	\$933
			<input type="checkbox"/>	\$873
			<input type="checkbox"/>	\$873

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Extended Backpacking Expedition	Tier 1	Tier 2	Tier 3	Tier 4
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AGES 13-17 (Grades 9-12)				
August 9-August 20 (Week 4A & B (through Thursday) - All gender	<input type="checkbox"/>	\$1840	<input type="checkbox"/>	\$1712
Optional 2 night camp stay (Week 4B Friday-Saturday)	<input type="checkbox"/>	\$167	<input type="checkbox"/>	\$154
			<input type="checkbox"/>	\$1600
			<input type="checkbox"/>	\$146

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Bus Transportation

\$164 Round Trip
\$82 One-Way

Please note that our bus system runs on our two week resident camp schedule. If your camper is only staying for one week and requires transportation to and/or from camp on a day that transportation is otherwise unavailable, please contact our office at 413-528-1227. **Bus transportation is available on the following dates to and from camp. Please select from available options.**

Dates: 6/28 to camp only 7/12
 7/26 8/9 8/22 from camp only

Please select bus location here:
 Fairfield Bridgeport
 Manhattan White Plains
 Boston

Please consider a contribution to our annual support campaign described below.
Camp is possible because of you!

Annual Campaign The Annual Campaign helps make it possible for Camp Hi-Rock to offer a high quality traditional camp experience at a subsidized rate for all children. Funds from the campaign support all youth programs and the Strong Kids Campership Program which provides financial assistance to campers in need. Please consider contributing to this effort to help Hi-Rock provide a strong camp for all children.

Please use this space to calculate your fees

Annual YMCA Membership	\$ <u> 30 </u>
If your camper already has a current facility membership, please write the name and location of the facility here:	
Session Fees (total from above)	\$ _____
Bus Transportation	\$ _____
Annual Campaign Donation	\$ _____
Total Due (add all fees above)	\$ _____
\$75 non-refundable deposit	\$ <u> -75 </u>
Balance due by JUNE 1, 2020	\$ _____

Payment Method - VISA/MasterCard/AMEX/Check

Please choose payment option below

Note: Registrations will not be processed without deposit and/or approved payment plan.

Full payment is due JUNE 1.

Deposit included; balance will be sent by check **JUNE 1**
 Deposit included; use credit card for balance **JUNE 1**
 Use credit card for deposit; balance to be paid by check **JUNE 1**
 Use credit card for deposit now AND balance **JUNE 1**
 Use credit card for monthly payments from now through **JUNE 1**
 Use credit card now for full balance
 Application for financial assistance is included with registration. No deposit due until offer letter received.

Name on Card _____

Card # (VISA/MasterCard/American Express Only) _____

Expiration Date _____

Cardholder Signature _____ Date _____

Please note the following excerpts from the Parent Handbook and sign page 1 acknowledging you have read this information

The full Parent Handbook can be found on our website at <http://www.camphirock.org/resources>.

1. No camper will be admitted to camp without a completed Hi-Rock medical form documenting: a.) a physical examination conducted within one year prior to attendance at camp & signed by a physician; b.) a completed vaccination record showing current compliance with Massachusetts Public Health Code; and c.) a copy of health insurance information.
2. All camp balances are due by June 1. After the due date, fees are only refundable if camper is unable to attend for medical reasons verified in writing by a physician. **Camper's who leave due to homesickness or violation of the Camper Code of Conduct will not be given a refund.**
3. Financial assistance application forms are available upon request.
4. Changes to this form must be made in writing and submitted to the office, including session dates, transportation requests, emergency contacts, specialty activity sign ups, and cabin mate requests.
5. The camp administration will make every attempt to ensure that campers are placed in cabins with other children of the same grade and/or level of social and emotional development. Parents are welcome to contact us to provide any information that will be helpful to this effect. Campers should not expect to be placed in any particular unit since the overall distribution of ages varies each year and each session, depending on enrollment.

Health and Safety Policy Highlights

1. Daily medical care is provided by the medical staff in accordance with our standing orders from our consulting medical practice, Macony P.C. Our medical staff is available 24 hours a day. A sick call is available periodically throughout the day for mildly ill campers. First aid kits are kept in the program areas and the campers' living areas. They are also carried on hikes and overnight trips. The majority of first aid will be administered by the medical staff. The general staff will administer first aid when necessary. Individuals administering first aid are qualified in at least basic first aid. Staff members will call for assistance in any situation where procedure is unclear.
2. Medications of any kind, including over-the-counter medications and vitamins, can only be administered with a current and complete YMCA Camp Hi-Rock Medication Administration Release form, signed by both the parent/guardian and the prescribing physician. All medications will be locked in the camp infirmary. All administration of medication will take place under the direct supervision of camp medical staff. Should a medication be required to be kept on the camper's person, a physician must provide a written authorization for the medication to be with the camper at all times (usually in the case of albuterol or epinephrine). YMCA Camp Hi-Rock has standing orders to administer some typical over-the-counter medications as deemed necessary by our medical staff, including acetaminophen (Tylenol), Benadryl, milk of magnesia, oxygen, VoSol (ear drops), oral glucose, Chloraseptic, activated charcoal, and others as deemed necessary by our consulting physicians. Medications given per standing orders do not require a Medication Administration Release.
3. Emergency medical care is administered by the medical staff, and, if necessary, campers will be transported to a hospital or doctor's office for further treatment. In the case where the camp emergency vehicle is inadequate given the patient's needs, or in any other case deemed necessary by camp staff, the Emergency Medical System will be activated.
4. The camp must comply with the regulations of the State of Massachusetts Department of Public Health and be licensed by the local Board of Health.
5. Copies of our background check, complete health care and discipline policies and our procedures for filing grievances are available to parents upon request.
6. On BOLD GOLD trips, medical staff responsibilities will be filled by trips leaders who hold either Wilderness First Responder or a Wilderness First Aid certification.

BOLD & GOLD Information

For more information about our BOLD & GOLD trip offerings and program descriptions, please visit our website at <http://camphirock.org/camps/bold-gold-wilderness-adventures/>.

BOLD & GOLD Contact Information

If you would like to speak with someone about BOLD & GOLD or have specific questions about the program, please contact Kory Stratton by email at kory@camphirock.org or by phone at 413-528-1227.

Financial Assistance Application

Financial Assistance Applications are due April 1st. Applications received after April 1st will only be processed as time allows and may not qualify for assistance for the 2020 season. Please check the website at camphirock.org/resources for the paper application form.

**Mail registration forms to:
YMCA Camp Hi-Rock
Attn: BOLD & GOLD Registration
544 East Street
Mount Washington, MA 01258**