



2025 Mountain Mist Day Camp Registration Form

CAMPER FIRST NAME _____ LAST NAME _____
 STREET ADDRESS _____ CITY _____
 STATE _____ ZIP CODE _____ DOB: _____ AGE: _____
 GENDER: **M** or **F** Grade completed as of 6/25: _____ **PRIMARY MEMBER CELL PHONE:** _____
EMAIL ADDRESS OF PRIMARY MEMBER: _____

Does your child have any medical conditions, special needs, or diagnoses? Y _ N _

Session	Traditional	Specialty	Extended Day	Transportation
Session 1 June 16 - 27	<input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Art <input type="checkbox"/> Cooking	<input type="checkbox"/> AM \$120 <input type="checkbox"/> PM \$140 <input type="checkbox"/> Both \$230	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
Session 2 June 30 - July 11 (no July 4)	<input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> STEM <input type="checkbox"/> Cooking <input type="checkbox"/> Art	<input type="checkbox"/> AM \$120 <input type="checkbox"/> PM \$140 <input type="checkbox"/> Both \$230	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
Session 3 July 14 - July 25	<input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Cooking <input type="checkbox"/> Art	<input type="checkbox"/> AM \$120 <input type="checkbox"/> PM \$140 <input type="checkbox"/> Both \$230	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
Session 4 July 28 - August 8	<input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> STEM <input type="checkbox"/> Art <input type="checkbox"/> Cooking <input type="checkbox"/> Pathfinders W 1 <input type="checkbox"/> Pathfinders W2	<input type="checkbox"/> AM \$120 <input type="checkbox"/> PM \$140 <input type="checkbox"/> Both \$230	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
Session 5 August 11 - 22	<input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Dance Camp (Grades 1-12) <input type="checkbox"/> Art <input type="checkbox"/> Cooking	<input type="checkbox"/> AM \$120 <input type="checkbox"/> PM \$140 <input type="checkbox"/> Both \$230	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____

Office Use Only

Total Camp Fees: \$ _____ Scholarship Y__ No ____
 One time Camp Improvement Fee + \$35 DCF Y__ No ____
 Total Amount Due: \$ _____
 Auto Draft Amount \$ _____

Office Use Only

Complete and signed registration form
 Auto draft set up
 Payment waiver received
 Camp start date
 Parent/Guardian waiver signed

Staff name _____ Date _____



**Meriden-New Britain-Berlin YMCA
Summer Camp Program**

Authorization for Reoccurring Credit/Debit Card Transactions

I, _____ give the Meriden New Britain-Berlin YMCA authorization to process my summer camp payments by Credit/Debit Card or bank account.

Child(ren) Name(s): _____

Transactions will be processed weekly, every Monday (in advance), in the amount of

\$ _____

It will be my responsibility to notify the Meriden-New Britain-Berlin YMCAs in the event that I cancel my credit/debit card. I will also notify the YMCA when I receive a new expiration date on my card.

If for some reason a transaction will not post (account closed, account suspended, insufficient funds, etc.), I will be charged a \$25.00 re-draft fee by the YMCAs ECASH system, which is a collection system that will go after collecting the missed payment(s).

Name as it appears on the card (Please Print): _____

Address connected to the card: _____ Zip Code: _____

- MasterCard
- Visa
- American Express
- Discover

Card Number: _____ Expiration Date: _____

Security Code (as it appears on the back of the card): _____ OR:

- EFT Bank Account: Checking or Savings
Routing# _____
Account# _____

By signing below I acknowledge that I agree to the statements written above and also give the Meriden-New Britain-Berlin YMCA my permission to charge the card or account above for my weekly program payments. I also understand that a written 2 weeks' notice is required for withdrawing from all summer camp programs.

Cardholder Signature: _____ Today's Date: _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Dear Parents,

Meriden-New Britain YMCA summer camps work with CampDoc to better serve our participants and staff. CampDoc offers an electronic camp information record system for camps, and you can now complete your participant's camp information electronically.

The security and privacy of your participant's camp information is important to us. The CampDoc site is secure, encrypted, and password protected. You can find additional information about CampDoc privacy and security information at www.docnetwork.org/security.

After signing up for your program, you will receive an "Invitation" email from CampDoc.

- Click on the green "**Accept Invite**" link within the email to create your CampDoc account.
- In the **Confirm Email** box, type your *email address* in order to confirm.
- In the **Password** box, type the password that you want to use.
- Click the **CONTINUE** button.

After you log in, select your participant's name and click on the health profile link to complete your participant's information.

Required questions will be marked with an * and outlined in red. Upload any required documents to your CampDoc account. If you're on a phone/tablet, you can take a picture to upload the document.

Keep in mind that you can return to app.campdoc.com at any time to make updates to your participant's health information before your program begins. You can log in using the email address and password you previously created.

We're excited to let you know that your participant's health information will save from year-to-year, so once you complete it in CampDoc this season, you won't have to start from scratch next year.

Additionally, CampDoc sends out periodic reminder emails for incomplete health information. These notifications come from campdoc.com, so please add this to your safe sender list to avoid accidental delivery to junk and spam folders. We don't want you to miss important notices about Mountain Mist Day Camp!

Please note that CampDoc supports the current and previous major releases of [Chrome](#), [Firefox](#), [Microsoft Edge](#), and [Safari](#) which provide improved security and performance for health information.

For additional assistance, you can navigate to support.campdoc.com or contact our Support Team at support@campdoc.com or 734-636-1000.

We are excited to continually improve, building safer, more productive and more efficient systems to create the best experience for you and your family!

We can't wait to see you this summer,
Camp Thundermoon Staff

MERIDEN-NEW BRITAIN-BERLIN YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.

MERIDEN YMCA
110 West Main Street
Meriden CT 06451
203 235 6386
www.meridenymca.org

NEW BRITAIN-BERLIN YMCA
50 High Street
New Britain CT 06051
860 229 3787
www.nbbymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

FIND YOUR FUN

MERIDEN YMCA MOUNTAIN MIST DAY CAMP



2025 Camp Lawn Sign Program

Display a Mountain Mist Day Camp sign on your lawn for a minimum of one month and save! Savings are per child, for one session.

Register on these dates and save:

February 1, 2025	\$50 + \$50 Y Bucks towards a future program
February 2 - 28, 2025	\$35
March 1 - 31, 2025	\$25
April 1 - 30, 2025	\$15

I agree to display a Meriden YMCA Mountain Mist Day Camp sign on my lawn (or on my porch or in my window) for a minimum of one month.

Name _____

Address _____

Phone Number _____

Email _____

Date _____

Please select one:

I picked up a sign when I registered.

Please have the Meriden YMCA will deliver it to you and install it in my yard.

Thank you for choosing Mountain Mist Day Camp.

MERIDEN YMCA

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