



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Find a Safe, Healthy & Fun Summer @ the WCY!

WALDO COUNTY YMCA
2025 Summer Day Camps



Annual Member Registration opens March 3
3-Month & Non-Member registration opens March 10
Hours: Monday - Friday 8:30 a.m. - 4:30 p.m.

CURIOSITY CAMP: Age 4 & 5 (must be 4 by March 1, 2025 and be fully potty-trained)

For our youngest campers' first camp experience we offer this structured & creative camp focusing on building independence. Games, activities & crafts change weekly supporting our theme. Time is spent at the Y swimming in our pool, outside on our playground, and under our Pavilion. Field trips to local parks. **Annual Member benefit - Little Learners Preschool sign up first.**

DISCOVERY CAMP: Completed grades K - 1

Get ready for guaranteed fun and discover what the Y can offer. This camp will break into smaller groups and fill them with a variety of creative activities, crafts and swimming. We encourage all campers to participate in team-building activities as well as those centered around our core values of Caring, Honesty, Respect & Responsibility.

EXPLORER CAMP: Completed grades 2-3

Our goal is to guide campers to embrace nature in a safe environment to explore and create memories for life. This group will venture on field trips, swimming and fun activities that pertain to the weekly themes.

ADVENTURE CAMP: Completed grades 4 - 7

We will travel around Belfast and utilize the surrounding schools as our home base. Our focus is on physical and mental team building games mixed with some healthy competition. Some of the many games we play are kickball, flag football & dodgeball. Campers will spend much of the day outside & swimming at the Y. Dress in or bring layers in case of weather.

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Programming in each camp will be age dependent. Refer to weekly camp emails for specific details.

Week 1: June 23 - 27 Blast Off	Reach for the stars- We will embark on a space adventure full of planets, creatures, and futuristic fun.
Week 2: June 30-July 3 Carnival Week	(Prorated-4 day week only) This will be a week to remember with carnival games, such as ring toss, balloon popping and much more.
Week 3: July 7- 11 Great Outdoors	Safari based with exploration of outside adventures. This week expect hiking, and wildlife themed activities in the great outdoors.
Week 4: July 14 - 18 Sports Week	Each camp will enjoy a variety of races, games, and healthy competition to encourage sportsmanship & teamwork in a range of sports.
Week 5: July 21 - 25 Around The World	Campers will embark on an adventure around the world in five days, learning about different cultures and enjoying new experiences.
Week 6: July 28 - Aug 1 Color Wars	Put on your game face! This incredible team building week will put everyone to the test letting campers colorful side shine through. We'll end our week with a good ol' color run!
Week 7: Aug 4- 8 Mystery Week	Do you love a good mystery? Campers will learn and use skills to survive fun camp activities, games and complete scavenger hunts.
Week 8: Aug 11 - 15 Lights-Camera- Action	The final week of music and fun. Campers will have the opportunity to explore different genres of musical activities and participate in our end of the season talent show on the last day of camp.



WALDO COUNTY YMCA 2025 SUMMER DAY CAMP REGISTRATION DAY CAMP INFORMATION

CAMP REGISTRATION SCHEDULE

Annual Member Registration opens March 3
3-Month & Non-Member registration opens March 10

WE ARE HERE TO HELP! In addition to providing our own Financial Assistance we have received grant funding from United Midcoast Charities, Maine Community Foundation, and the Dale Cross Scholarship Fund to financially assist families with camp costs. Complete the request at the bottom of page 4 if you need assistance.

If you have any questions, please speak with our Youth Development Director, Faith Boynton at 207.338.4598 or fboynton@waldocountymca.org.

Hours: Monday - Friday 8:30 a.m. - 4:30 p.m. with Extended Care offered: 7:30 - 8:30 a.m. and 4:30 - 5:30 p.m.

PLEASE BRING:

- Positive Attitude
- Full water bottle
- Morning & Afternoon snacks
- Swim Suit, Towel, and goggles
- Sneakers - sandals are okay; no flip flops
- Sunscreen - please apply **before** drop off
- Personal Floatation Device (PFD) is required for campers who cannot swim
- We reapply sunscreen throughout the day but ask that you please apply to your camper **before** morning drop off. You will be asked if you applied sunscreen when you check your camper in for the day.
- Label all items your camper brings to camp and check our lost and found for missing items.
- No electronic devices. We want this to be a screen free experience. We will have quiet time where we will play board/card games and do arts & crafts... they will even invent some games.
- Please do not send cell phones to camp with your children. If there is an emergency, we will contact you.

WE OFFER LUNCH ALL 5 DAYS EACH WEEK!

- **RSU 71 Lunch program:** In partnership with RSU 71 and the Maine Department of Education, the WCY offers FREE LUNCH Monday - Thursday for all eight weeks of camp! Lunch includes a sandwich, two healthy sides and milk.
- **Cookout Fridays:** The week ends with our traditional Y hosted cookout with the Y staff serving hot dogs, watermelon, pretzels, and popcorn. The Y provides all the food for Friday cookouts and we wrap up the cookout with all camps dancing, singing and some fun all camp games.

DROP OFF: At our "CAMPER CHECK IN" table located outside the building. We will ask who will pick up your camper at the end of the day. If this changes please let us know via email or calling the front desk.

PICK UP: Campers will be with their camp in our field to the left of our building; or in case of rain or lighting, in our gymnasium. I.D. is **REQUIRED** for pick up. Please find the Camp Director to sign your camper out for the day.

TO REGISTER: Return completed forms along with a \$50 non-refundable deposit for each week you are registering. If applicable, please complete the financial assistance request on page 4. We CANNOT complete registration before the financial assistance is reviewed. Registration remains open until full and then we will start a waiting list. We will contact you directly if a spot opens.

WEEKLY DEPOSIT: A \$50 non-refundable registration fee per week is due at time of registration. This can be transferred to a different week but will not be returned in case of a cancellation.

CANCELLATION/REFUND POLICY: Day Camps are subject to cancellation if minimum enrollment is not reached. Cancellation decisions will be made prior to the camp session. Any registration cancelled by a caregiver will be fully refunded less the \$50 deposit. If the WCY cannot run a Day Camp for any reason we will issue a full or pro-rated refund for the week.

FINANCIAL ASSISTANCE We WANT to help! Summer Day Camp scholarships are based on income and granted to families who need financial support but are not eligible for state subsidy. Please be sure to apply for scholarships through the Y early, as we grant \$19,000 on a first-come, first serve basis. Please see page 4 for the application.

MAINE CHILDCARE AFFORDABILITY Maine's childcare affordability program helps eligible families pay for child care/camp so they can go to work, go to school, or participate in job training programs. Visit www.maine.gov or call 1-877-680- 5866 for more information on how to apply.

AUTOMATIC PAYMENTS: Made with a credit/debit card will be drafted on Mondays prior to arrival each week. To register for camp, Annual members can be paid by monthly automatic payment using a debit or credit card or in full when signing up for a membership.

Registration will not be considered complete until the required documents are processed; no exceptions. An email confirmation will be sent once registration has been entered into our system which may take a few days to process.

HERE FOR YOU

WHAT TO EXPECT EACH DAY AT DAY CAMP

REGISTRATION/PAYMENT INFORMATION



WALDO COUNTY YMCA 2025 SUMMER DAY CAMP REGISTRATION

Annual Member Registration opens March 3
3 Month & Non Member registration opens March 10
FINANCIAL ASSISTANCE AVAILABLE - see reverse

Does the camper have a current Y Membership (circle): Family Single Parent Family Youth Not a current Member

Member ST#: (Office use only)

CAMPER'S NAME: Age: Birth Date: / /

Gender: M / F / N Current School: Qualify for Free/Reduced Lunch: Y / N
(Financial Assistance Available see reverse)

Campers T-Shirt Size (please circle): youth small youth medium youth large youth XL other

Address: City: State: Zip:

Primary phone # for camper: Primary phone contact name:

Caregiver Name: Relationship

Primary Phone: Email: Birth Date: / /

Address: City/State/Zip: Employer:

Caregiver Name: Relationship

Primary Phone: Email: Birth Date: / /

Address: City/State/Zip: Employer:

Emergency Contact: Relationship:

Primary Phone: Work Phone:

In case of an emergency we will attempt to contact parents/caregiver first.

Doctor: Phone:

Address: City/State/Zip:

Dentist: Phone:

Address: City/State/Zip:

Insurance Provider: Policy #:

Medical Concerns/Conditions:

Dietary Restrictions:

Physical Restrictions:

Medications:

Allergies:

Date of last Tetanus Shot:

Names of Persons permitted to remove child from Camp:

- 1)
- 2)
- 3)

PLEASE NOTE: Photo ID **REQUIRED.** The parent/caregiver **MUST** notify the YMCA Camp Staff, in advance, when regular transportation or pick-up methods will vary. If there is a parent or person who is not to have contact with the child due to a court order or restraining order, the YMCA Camp Staff must have a copy of the document in order to abide by the parent request.

Week 1 Week 2 Week 3 Week 4 Week 5 Week 6 Week 7 Week 8

OFFICE USE ONLY



WALDO COUNTY YMCA
2025 SUMMER DAY CAMP REGISTRATION
WE HAVE RECEIVED GRANT MONEY TO FINANCIALLY ASSIST FAMILIES!

CAMPER'S NAME: _____

STEP 1: CAMPER'S GRADE

What grade did the camper **COMPLETE** in SPRING 2025? _____

What grade will the camper **ENTER** in FALL 2025? _____

STEP 2: CIRCLE WHICH WEEKS ATTENDING

Wk 1: June 23 - June 27 Blast Off	Wk 2: June 30- July 3 <u>4 day, prorated week</u> Carnival Week	Wk 3: July 7 - 11 Great Outdoors	Wk 4: July 14 - 18 Sports Week
Wk 5: July 21 - 25 Around the World	Wk 6: July 28-Aug 1 Color Wars	Wk 7: Aug 4 - 8 Mystery Week	Wk 8: Aug 11 - 15 Lights-Camera- Action

STEP 3: CIRCLE EXTENDED CARE OPTION (\$40 EXTRA PER WEEK FOR BOTH)

MORNING	AFTERNOON	NONE
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STEP 4 : PAYMENT INFORMATION - Required for registration: **\$50** Non Refundable deposit per week attending.

SIGN UP FOR AUTOMATIC PAYMENT: Payments are due on Monday of each week camper is attending.

CC Number: _____ Exp. Date: _____ CVC: _____

Family & Single Parent Family Membership \$ 195 week (wk2 prorated=\$156)	Youth Annual Membership \$215 week (wk2 prorated=\$172)	3-Month & Non-Members \$275 week (wk2 prorated=\$220)	Total Due \$ _____	Deposit \$ _____
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Please return your completed forms and deposit to the WCY. Registration will not be considered complete until the required documents are processed; no exceptions. An email confirmation will be sent once registration has been entered into our system which may take a few days to process.

WE ARE HERE TO HELP!

We have received grant money to financially assist families!

Financial Assistance Application- Please complete if you NEED assistance.

The WCY is a 501(c)(3) charitable organization dependent on participant fees and membership fees to maintain services. The WCY is committed to serving people regardless of their income but expects participants to pay a fee based on their financial status. WCY membership and/or program fees may be reduced for qualified applicants and all circumstances will be considered.

Applicants Name: _____ Phone: _____

Applicant's Employer: _____ Applicant two's Employer: _____

Number of Dependent Children in Family _____ Ages: _____

Prior year Gross Family Income (Required) \$ _____ All other income \$ _____

Do you qualify for reduced school meals (please circle) Y / N

Please briefly explain specific circumstances that support your request for financial assistance:

I understand that a YMCA staff member will review this request. The above information is true and I also understand that I am responsible for notifying the Waldo County YMCA as to any change in my financial status.

Signature _____

Date _____

Waldo County YMCA Participant Waiver



NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your participation in Waldo County YMCA Programs, now or at any time in the future.

In consideration for being permitted to utilize the facilities, services, and programs of the Waldo County YMCA (hereinafter referred to as "YMCA") for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA.

THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Maine and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

As applicable per program participation:

- ✓ I hereby authorize the employees of the YMCA to call emergency medical assistance and/or perform basic first-aid procedures that are necessary in the judgment of the YMCA. I hereby authorize qualified medical personnel to administer necessary anesthesia and medical treatment in the event of an accident. I understand that I am encouraged to discontinue any activity at any time I feel unable to continue.
- ✓ I hereby authorize the YMCA to use photos and/or videos in promotional activities.
- ✓ I hereby authorize the employees of the YMCA to administer medication. Important: medications can only be administered with the medication in the prescription bottle. Without the Physicians name and prescription on the label we cannot administer medications.
- ✓ I hereby authorize the employees of the YMCA to assist in the application of Sun Block when necessary.
- ✓ I hereby authorize the qualified employees (over the age of 21) of the YMCA to transport by bus or personal vehicle.
- ✓ I hereby grant my child permission to attend field trips with the Y during the school year. Information will be sent home prior to each trip.
- ✓ I hereby authorize the YMCA to opt my email address in for email correspondence including newsletters.

Contagious Disease Warning & Disclaimer: Waldo County YMCA in no way warrants that infection from any known or unknown contagious diseases will not occur through participation in Waldo County YMCA programs and activities of accessing Waldo County YMCA facilities.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY & INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I Have Read This Release PLEASE Print Name of CAMPER: _____

Date: _____ Signature of Applicant: _____

Parent/Guardian Signature Necessary if participant is under age 18

Print Name of Signature: _____