

# 2017 REGISTRATION FORM

## Online registration available at widji.org

Please return this completed form with parental/guardian signature to: **YMCA Customer Service Center, 2125 E. Hennepin Ave. Suite 100, Mpls, MN 55413 • Phone 612-822-2267 • Fax 612-223-6322.** Upload to: [http://ymcamn.org/contact\\_us](http://ymcamn.org/contact_us)  
Please use one registration per child, per session.

**Camper Name** \_\_\_\_\_  
(last) (first) (middle)

Nickname \_\_\_\_\_ Gender \_\_\_\_\_ This is my \_\_\_\_\_ year at camp.

Camper Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age at camp \_\_\_\_ Grade in fall 2017 \_\_\_\_ School attending \_\_\_\_\_

**1st Contact Parent/Guardian** \_\_\_\_\_

**2nd Contact Parent/Guardian** \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_

Home phone \_\_\_\_\_

Work phone \_\_\_\_\_

Work phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

### SESSION INFORMATION

	Canoe or Backpack	Session Name	Session Dates	Session Fee
1st Choice:	_____	_____	_____	_____
2nd Choice:	_____	_____	_____	_____
3rd Choice:	_____	_____	_____	_____

**TRANSPORATION CHANGES** to original registration form including payment must be completed in writing no later than two weeks prior to the start of your child's session and will incur a \$25 change fee.

### TRAILMATE REQUEST

Please place me in the same group with (one friend): \_\_\_\_\_

**PAYMENT INFORMATION** A non-refundable \$200 deposit per camper per session must accompany each registration form. Remaining fees due by May 1, 2017. Registrations after May 1, 2017 require full payment or payment plan.

**BUS INFORMATION** Widjiwagan offers bus transportation to and from camp. Indicate mode of transportation below.

Check enclosed amount: \$ \_\_\_\_\_  
(payable to: YMCA Camp Widjiwagan)

Parent Transportation to camp \_\_\_\_\_ from camp \_\_\_\_\_  
White Bear Lake YMCA: to camp, \$65 \_\_\_\_\_ from camp, \$65 \_\_\_\_\_  
Cloquet: to camp, \$40 \_\_\_\_\_ from camp, \$40 \_\_\_\_\_

Please bill my:  Visa  MasterCard  Discover  Am Express

### TRANSPORTATION FOR OUT-OF-STATE CAMPERS

Widji can arrange transportation to or from the airport, bus or train station as a part of your camper's arrival and/or departure plans. If your camper requires out-of-state transportation accommodations in order to get to camp, they must arrive in St. Paul the evening before the first day of their session. We can provide overnight accommodations and meals for these campers. Please select from the following out-of-state transportation options:

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Please charge:  
 a \$200 non-refundable deposit only  the full fee of \$ \_\_\_\_\_  
 the \$200 deposit now and the remaining balance on May 1, 2017.

- (These charges INCLUDE the cost of the bus ride to camping or from camp returning to the White Bear YMCA.)
1. Transportation, before session, plus one night housing and meals \$175 \_\_\_\_\_
  2. One-way transportation to airport, bus or train station after session only \$110 \_\_\_\_\_

Note: Per PCI Compliance, credit cards are not stored in the system. Numbers are not on file.

Billing information if different from camper: Name \_\_\_\_\_ Phone: \_\_\_\_\_

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

### PARENTAL/GUARDIAN SIGNATURE REQUIRED

Please sign here \_\_\_\_\_

Please complete the Release Form and return with registration.

## CONFIDENTIAL HEALTH AND EMERGENCY INFORMATION

Widjiwagan wishes to provide the best possible experience for your child. We ask the following questions to help us gain an understanding of your child's needs in order to assure that he/she is placed in the proper session, trip or trail group. Please use additional paper if needed.

Is your child currently taking any prescription medications? Yes / No If yes, please list them and describe what they are for. \_\_\_\_\_

Is your child currently under the care of any medical specialists? Yes / No If yes, for what conditions? \_\_\_\_\_

Does your child have any sensory, physical, cognitive or emotional disabilities? Yes / No If yes, list them and state how they affect him/her. Do they require special accommodation? Please be specific! \_\_\_\_\_

## ADDITIONAL INFORMATION

How did you find out about Widji? \_\_\_\_\_

Submit forms: online at widji.org, fax to 612-223-6322

or mail to **YMCA CAMP WIDJIWAGAN**, 2125 East Hennepin Avenue, Suite 100, Minneapolis, MN 55413

## THIS SECTION MUST BE SIGNED BY A PARENT OR GUARDIAN BEFORE REGISTRATION WILL BE ACCEPTED RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

EFFECTIVE 8/01/13

In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the YMCA of the Greater Twin Cities (hereinafter referred to as YMCA) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct or conduct that constitutes greater than ordinary negligence. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume - and bear the costs of - all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if the YMCA did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Date \_\_\_\_\_

### PARENT OR GUARDIAN ADDITIONAL AGREEMENT (Must be completed for participants under the age of 18)

In consideration of \_\_\_\_\_ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_

### PARENT/GUARDIAN AUTHORIZATION SECTION — TRANSPORTATION/MEDICAL

1. In the event that I/my child need immediate medical attention for injuries received while participating in a YMCA program, I authorize the YMCA staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed.
2. I give permission for myself and/or my child to be transported by the YMCA as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in walking field trips.
3. I also give permission for myself or my child to enter Canada with the YMCA. I also understand that I/my child will need to bring our passport to camp if the trip involves such travel to Canada.
4. I hereby acknowledge that the YMCA will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise.
5. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. The YMCA receives medical information on campers/ participants that may need to be shared with medical providers.
6. If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If YMCA staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge the YMCA and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.

### GENERAL

1. I hereby release all pictures of myself or my child taken by the YMCA for promotional purposes and programming materials including the YMCA website.
2. I give my permission for the YMCA to administer sunscreen as needed and to change my child's diaper while my child is in their care.
3. I acknowledge that certain sections of this waiver may not apply to me and/or my child and the programs or activities that we have chosen but agree to be bound by any applicable language.

# LOTTERY & REGISTRATION

There will be two lotteries again this year. The first lottery will be for returning campers. The next day there will be a lottery for new campers.

**The \$200 deposit must be made by credit card or bank debit card.** This will allow us to delay processing the deposit until after the completion of the lottery.

Read through these instructions carefully so that you are fully informed on how the process works. If you have any questions after reading the instructions, feel free to call us at 612-822-2267.

**Lottery Deadline: All registrations must be received by midnight, Monday, December 12, 2016.**

**Lottery #1:** for returning campers: Tuesday, December 13, 2016. Everyone will be notified by phone.

**Lottery #2:** for new campers: Thursday, December 15, 2016. Everyone will be notified by phone.

**Open Enrollment:** begins Monday, December 19, 2016. At this time registrations will be processed on a first-come, first-served basis according to availability. Notification will occur by mail.

To be a part of this year's lottery, we must receive your registration by midnight, on Monday, December 12, 2016. We accept on-line, walk-in, mail and fax registrations for the lottery.

A \$200 deposit must accompany your registration. **The deposit must be paid by credit card or bank debit card only; no checks will be accepted during the lottery process. The deposit will not be processed until after completion of the lottery.**

Once enrolled, the deposit is then applied toward the balance of the camp fees. This deposit is non-refundable. Please read the cancellation policy on the registration form.

All spaces will be allotted on a lottery basis for registrations received by midnight December 12, as will the subsequent positions on the wait list. If you have listed more than one choice for sessions, you will be enrolled in the order of your choices according to space availability. This means that if you end up on the wait list for your first choice, and there is space available on your second choice, we will automatically enroll you in your second choice and keep you on the wait list for your first choice. Therefore, you increase your odds of getting into a session if you list more than one choice; the more you list, the greater the odds. **Please, list only those sessions which you know you will be able to attend.**

## TRAILMATE REQUESTS

In order to assure that requests for a trailmate are honored during the lottery process, we require that the registration forms for **both** campers list each other in the trailmate request section. We will be unable to honor a request if only one of the campers lists a trailmate. **Trailmate requests that involve both returning and new campers will be drawn in the new camper lottery. Please remember that we can honor only one trailmate request. Siblings that register for the same session will be placed in separate trail groups.**

## PAYMENTS

- ♦ A \$200 non-refundable deposit is due with each registration.
- ♦ All remaining fees are due by May 1, 2017.
- ♦ Registrations after May 1, 2017 require full payment.
- ♦ Any changes made to session dates or type of session will require a \$25 service fee.
- ♦ Payments can be made by check, Visa, MasterCard, Discover or American Express.

**You may set up a payment plan by calling 612-822-2267.**

## CANCELLATION AND REFUND POLICY

- ♦ Cancellations must be made in writing. If you cancel:
  1. On or before May 1, 2017, Widji will refund all fees except the deposit, which is \$200 for regular sessions, \$300 for Explorer and Advanced Explorer sessions, and \$500 for Mountaineer and Voyageur sessions.
  2. After May 1, 2017 all fees are non-refundable.\*  
\*Exception for #2: If a cancellation is made due to a medical condition and confirmed in writing by the treating physician, all fees but the deposit will be refunded.
  3. Campers who never make it off the waitlist can cancel at anytime and will be refunded their deposit.
- ♦ Our staff works as hard as possible to help campers with homesickness or behavioral issues, so we do not issue refunds for campers that leave early due to those reasons.
- ♦ Camp Widjiwagan reserves the right to send any camper home early who does not abide by camp rules or whose behavior is disruptive, uncontrollable, illegal, dangerous, or disrespectful to other campers or the camp community. No refund will be issued for any of the above reasons.

## PARTICIPATION REQUIREMENTS

Campers coming to Widjiwagan should be motivated and excited to experience simple wilderness travel, develop leadership, work as a group member, and be in good health.

Physical challenges are an inherent part of wilderness trips. Therefore, it is very important that each camper prepare themselves for the rigors of a strenuous wilderness experience to the best of their ability. Please let us know if your child has a disability or condition requiring accommodation. This will enable us to better meet your child's needs, within available resources and to the extent reasonable.

Widjiwagan will dismiss a child if they do not follow respectful behavior expectations. Harassment, use of drugs and alcohol, theft or damage of property, and disregarding instructions are actions that will lead to dismissal. If a child is dismissed, there will be no refund.

Also, please be sure you read and sign the "Acknowledgement of Risk and Release of Liability" section of the registration form. For specific trip details you are invited to attend the parent informational meeting in the spring of 2017.

Send registration with appropriate deposit to:

### YMCA CAMP WIDJIWAGAN

2125 East Hennepin Avenue, Suite 100  
Minneapolis, MN 55413

phone 612-822-2267 fax: 612-223-6322

Upload to: [http://ymcamn.org/contact\\_us](http://ymcamn.org/contact_us)