



**FOR YOUTH DEVELOPMENT®**  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# PUT A SPRING IN YOUR STEP

## **Spring Break Camp** CAMP IROQUOIS

**Join us at Camp Iroquois for a week of themes, memories, friendships and more; let your imagination explore!**

Ages 5-12

Monday - Friday 8:30am - 4:30pm

April 23 - April 27

\$165 Family Mem/ Week

\$195 Youth Mem/ Week

\$265 Non-Mem/ Week

**\* SEE REVERSE SIDE TO REGISTER!**

Questions? Contact:

Allie Clarke, Director of Camp Iroquois and Teens, at 637-2025 ext. 210 or [aclarke@syracuseymca.org](mailto:aclarke@syracuseymca.org)

# CAMP IROQUOIS SPRING BREAK CAMP

Code: 0445SPRBRK

Please put a check mark on the corresponding line for the appropriate program fee:

\$165 Family Mem/Week     \$195 Youth Mem/Week     \$265 Non-Mem/Week

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Allergies/ Special Needs: \_\_\_\_\_

\* If child is bringing medication to camp, please request and complete a Medication Consent Form

Is your child capable of independent toileting?  Yes     No

Is your child able to successfully participate in a program with 1 adult per group of 10 children?  Yes     No

\* If you answer no, please contact Morgan Ruggeri, Inclusion Director, 637-2025 ext. 211 to discuss services.

Does your child require access to any special equipment?  Yes     No

Equipment: \_\_\_\_\_

E-Mail: \_\_\_\_\_

I allow the YMCA to use my photograph/my child's photograph for publicity and marketing purposes.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

**\*Please be sure to pack a bag lunch daily and please be sure to dress according to weather!**