

2023 YMCA of Southwest Florida

CAMP UPDATE FORM

| CAMPER INFORMATION | | | | | | | | | | | | | |
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| Camper Name: | | | | | | | | | | | | | |
| | | Li | Last First | | | | | | | Date | Date of Birth | | |
| Parent Name: | | | Last First | | | | | | | Meml | Member # | | |
| Hom | e Phor | ne: (| Today's Date: | | | | | | | | | | |
| | | | | | ٨٢ | חר | | ADC | | | | | |
| ADD OR REMOVE CAMPS | | | | | | | | | | | | | |
| ADD | REMOVE | | | | | | | | | | | | |
| | <u>r</u> | 1 | Camp Week: | | | | | Camp Name: | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| TRANSFERDING CAMPS | | | | | | | | | | | | | |
| TRANSFERRING CAMPS OFFICE USE ONLY | | | | | | | | | | | | | |
| Original Camp | | | | | | | New | | | | | Cost | |
| | Week: | | | Original Camp | Name: | | Camp Week: | | New Camp Na | me: | 1 | Difference: | |
| | | | | | | | | | | | | | |
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| | | | | | Р | ΑΥΙ | MENT INFORMATI | ON | | | | | |
| Payment Method: Check Cash Credit Card Card Type: Visa MC AmEx Discover | | | | | | | | | | | | | |
| Card Number (last | | | | | | | | | | | | | |
| foui | r digit: | s): | | | | | | | Exp Date: | CSC: | | | |
| I have read and agree to the terms and conditions of the Cancellation Policy and Check Refund Policy. Refunds and Cancellations: All cancellation requests must be made in writing at least 15 days prior to the start of the camp session. Cancellations will result in the forfeiture of the non-refundable deposit per session as well as non-refundable registration fee. • A full refund (less the deposit and registration fee) will be issued if a written cancellation is received within the timeframe indicated. • If a written cancellation is received with less than 15 days notice, a refund will be issued for all eligible paid fees less a 20% processing fee, non-refundable deposits, and non-refundable registration fee. • Cancellations made after the start of a session are not eligible for refund. Check refunds: If you paid by check or your camp payments were made through EFT draft from a checking or savings account, it takes 3-4 weeks from the date on this form to receive your refund in the mail. Parent Signature: Office Use Only: Welcome Desk Accepted by: Date: | | | | | | | | | | | | | |
| W | elcome | Desk Acc | epte | d by: | | | Date: | | | | | | |
| Pr | ocesse | d by: | | | | | Date: | | | | | | |