



# Halloween Harvest Fest Family Camp Registration

Camp Jewell YMCA

A branch of the YMCA of Greater Hartford

Family Camp Weekend: \_\_\_\_\_ Year: \_\_\_\_\_

Family Last Name \_\_\_\_\_ Primary Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Family Address \_\_\_\_\_

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

At Family Camp, the more people you bring the more money you save!  
Families may choose the following option.

**OPTION I** Cabins 1A through 6B  
(12 available half-cabins)  
FLAT RATE: \$450 a half-cabin (up to 12 people)  
Private sleeping room and bath/shared living room  
Cabin Request: 1st choice \_\_\_\_\_ 2nd: \_\_\_\_\_  
3rd: \_\_\_\_\_  
Will you be sharing your cabin side with another family?  
\_\_\_\_\_

A \$200 deposit is required to hold your reservation  
(one deposit per cabin).

Amount Enclosed: \$ \_\_\_\_\_

Credit Card Payment

Please charge \$ \_\_\_\_\_ to my credit card.  
\_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover \_\_\_\_\_ AMEX

Name on card: \_\_\_\_\_

Card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Please list those who will be attending family camp in your cabin (include first and LAST names)

- 1: \_\_\_\_\_ Age: \_\_\_\_\_
- 2: \_\_\_\_\_ Age: \_\_\_\_\_
- 3: \_\_\_\_\_ Age: \_\_\_\_\_
- 4: \_\_\_\_\_ Age: \_\_\_\_\_
- 5: \_\_\_\_\_ Age: \_\_\_\_\_
- 6: \_\_\_\_\_ Age: \_\_\_\_\_
- 7: \_\_\_\_\_ Age: \_\_\_\_\_
- 8: \_\_\_\_\_ Age: \_\_\_\_\_
- 9: \_\_\_\_\_ Age: \_\_\_\_\_
- 10: \_\_\_\_\_ Age: \_\_\_\_\_
- 11: \_\_\_\_\_ Age: \_\_\_\_\_
- 12: \_\_\_\_\_ Age: \_\_\_\_\_

Please add additional guests to the reverse side of this registration form if needed.

Do you have any additional requests? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- I realize that even after reasonable precautions are taken some activities such as but not limited to swimming, hiking, horse riding, boating, and climbing may involve inherent risks for which Camp Jewell YMCA cannot be held responsible.
- I understand that the \$200 deposit due with this registration is non-refundable and non-transferable.
- I understand that my registration can be cancelled if payment in full is not received within 30 days prior to the start of Family Camp.
- I authorize the YMCA to have and use the name, photographs, slides, and video of the person(s) named on this registration form in camp promotional materials.
- I understand that while every effort is made to honor cabin and family requests there is no guarantee.

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FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

Family Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

**PAYMENTS TO CAMP JEWELL MAY ONLY BE MADE BY ONE PARTICIPANT. Please decide who in your group will be reserving the cabin and making payments.**

**Family name responsible for payment: \_\_\_\_\_.**