

NEW CANAAN YMCA 2007 – 2008 Y-GUIDE & Y-PRINCESS NEW PARTICIPANT PROGRAM REGISTRATION

NO-ALCOHOL POLICY

AS A NEW CANAAN YMCA Y-GUIDE & Y-PRINCESS FATHER/MALE GUARDIAN, I AM AWARE OF THE NO-ALCOHOL POLICY FOR ALL EVENTS AND AGREE TO ABIDE BY THIS POLICY.

FATHER/MALE GUARDIAN SIGNATURE: _____ Date: _____

*** IF PARTICIPANT DOES NOT AGREE TO THIS POLICY, REGISTRATION/ ATTENDANCE TO THE FALL, WINTER AND SPRING OUTINGS WILL NOT BE ALLOWED ***

(Please print)

FATHER'S NAME _____ MOTHER'S NAME _____

ADDRESS _____ TOWN _____ STATE _____ ZIP _____

PHONE #S Home (____) _____ Work (____) _____

E-MAIL (BEST ADDRESS FOR Y -PRINCESS/Y-GUIDE INFO) _____

***** PLEASE PRINT EMAIL ADDRESS CLEARLY *****

* Do you give the YMCA permission to use this e-mail address for non Y-Guide and Y- Princess New Canaan YMCA updates. _____ Yes _____ No

1 - CHILD'S NAME _____

SEX _____ BIRTHDAY _____ GRADE _____ SCHOOL _____

TRIBE PREFERENCE _____

2 - CHILD'S NAME _____

SEX _____ BIRTHDAY _____ GRADE _____ SCHOOL _____

TRIBE PREFERENCE _____

*** SPACE FOR ADDITIONAL CHILDREN ON BACK OF FORM ***

FEES

<u>CATEGORY</u>	<u>FEE</u>	<u># OF CHILDREN</u>	<u>TOTAL DUE</u>
1 ST YEAR PARTICIPANT	MEMBER - \$87.00	X _____	= \$ _____
	NON-MEMBER - \$170.00	X _____	= \$ _____
FATHER/GUARDIAN	MEMBER - FREE	_____	_____
	NON-MEMBER - \$137.00	_____	= \$ _____
SIBLING	MEMBER - \$66.00	X _____	= \$ _____
	NON-MEMBER - \$150.00	X _____	= \$ _____
Make check payable to New Canaan YMCA		GRAND TOTAL	= \$ _____
<u>CREDIT CARD PAYMENT</u>			
Master Card / Visa # _____		Expires _____	
Signature _____			

RETURN BETWEEN SEPTEMBER 10 AND 17, 2007 TO:

NCYMCA Attention: Barbara Kelly, 564 South Avenue, New Canaan, CT 06840 Phone 966-4528 Fax: 972-7738