Registration Form
Harris After School YMCA Family Camp

Name_____

Street Address_____City_____St____Zip_____

Home ( )_____Work ( )_____Fax ( )_____

Mobile ( )_____ Email Address_____

Please list those participating:

_____ DOB ___/___/_____
_____ DOB ___/___/_____
_____ DOB ___/___/_____
_____ DOB ___/___/_____

If possible we would like to be housed with the following family_____

Adult (18 & older)	$50 Adults: _____	Total:$_____	
Child (age 7-17)	$25 Children: _____	Total:$_____	
Child (6 & under)	$0 Children: _____	Total:$_____	Total:$_____

Payment Information (check one)

❍ Enclosed is my full amount ❍ Enclosed is my $50 deposit (balance due May 1st)
❍ Please charge my credit card for the amount of $_____

Name on card: _____
Billing Address: _____
Card Number: _____ Expiration:_____
❍ Visa ❍ MC ❍ AmEx ❍ Disc Security Code:_____
*Fees cover all food, housing and activities.

Make checks payable to: **YMCA Camp Harrison**

I understand that all cancellations must be 30 days prior to Family Camp to receive full refund.

Signature: _____ Date:_____

Mail to: Camp Harrison, 7901 South NC Hwy. 18, Boomer, NC 28606
Phone: (800) 514-1417 - Fax: (336) 921-7069

Camp Harrison
HERRING RIDGE