



Lynch/van Otterloo YMCA
 40 Leggs Hill Rd. Marblehead, MA 01945
 Phone: 781-631-9622 Fax: 781-639-0190

Junior Leaders

(Campers entering Grades 4-6, co-ed)

Camper's Name _____ Birth date _____

Session 1/2 6/28-7/9

3 day Option: _____ M T W TH F (circle days)
 4 day Option: _____ M T W TH F (circle days)
 5 day Option: _____

Session 3/4 7/12-7/23

3 day Option: _____ M T W TH F (circle days)
 4 day Option: _____ M T W TH F (circle days)
 5 day Option: _____

Session 5/6 7/26-8/6

3 day Option: _____ M T W TH F (circle days)
 4 day Option: _____ M T W TH F (circle days)
 5 day Option: _____

Session 7/8 8/9-8/20

3 day Option: _____ M T W TH F (circle days)
 4 day Option: _____ M T W TH F (circle days)
 5 day Option: _____

Session 9/10 8/23-9/3

3 day Option: _____ M T W TH F (circle days)
 4 day Option: _____ M T W TH F (circle days)
 5 day Option: _____

Rates:

Member

Community

*Membership must be current at the time of registration in order to receive member rates!*****

	9am-1pm	9am-4:30pm	8am-6pm
3 Day	\$150	\$300	\$350
4 Day	\$190	\$385	\$445
5 Day	\$225	\$465	\$540

	9am-1pm	9am-4:500pm	8am-6pm
3 Day	\$180	\$330	\$375
4 Day	\$240	\$425	\$490
5 Day	\$280	\$520	\$595

Financial Assistance Information

Nan Camp _____ School Pay _____ Voucher _____ Rotary _____ Access _____ Other _____

All applicants with financial assistance must include a letter of verifying amount and status at the time of registration in order to receive a reduced rate.

Payment: Complete Appropriate Section

CASH _____ Amount Paid _____ CHECK _____ Check # _____ Amount _____

Credit Card: MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____

Name on Card _____

Credit Card # _____ CVV # _____ Exp. Date ____ / ____

Signature _____

Amount to Charge _____

A \$50 per session deposit must be submitted with all applications