



Penobscot Bay YMCA 2022 Summer Camp Payment Plan Request Form TOWN OF CAMDEN RESIDENTS

Child's Name: _____ Name of Adult Responsible for Payment: _____

PRO-RATED WEEK 1 & 3: Snow Bowl Camp: \$144 YMCA Members / \$180 YMCA Participants (non-members)

CAMP WEEKS 2 & 4-9: Snow Bowl Camp: \$180 YMCA Members / \$225 YMCA Participants (non-members)

Snow Bowl Camp Rates for Camden Residents (see below - may use tier pricing for any 6 of the 9 weeks offered):

TIER 1 PRICING:

- Six Weeks: \$600 (\$100/week)
- Weekly: \$140

TIER 2 PRICING:

- Six Weeks: \$540 (\$90/week)
- Weekly: \$132

TIER 3 PRICING:

- Six Weeks: \$450 (\$75/week)
- Weekly: \$125

Week	Camp Dates	Camp Attending	Member Rate (A)	Participant Rate (A)	Camp Deposit (B)
1	6/21 - 6/24		\$	\$	\$40
2	6/27 - 7/1		\$	\$	\$40
3	7/5 - 7/8		\$	\$	\$40
4	7/11 - 7/15		\$	\$	\$40
5	7/18 - 7/22		\$	\$	\$40
6	7/25 - 7/29		\$	\$	\$40
7	8/1 - 8/5		\$	\$	\$40
8	8/8 - 8/12		\$	\$	\$40
9	8/15 - 8/19		\$	\$	\$40
Totals					

Total Camp Cost (A)	\$
Total Deposit Paid (B)	\$
Remaining Camp Balance (C)	\$
Total # of Weeks Left before/by May 27th (D)	#
Drafts start on (date): Camp is billed each Friday	
Weekly Installment Amount	\$
Total Remaining Balance (C) divided by the Total # of Weeks before/by May 27 (D)	
Total Months Remaining (E)	#
before June (March, April, and May)	
Monthly Installment Amount	\$
Total Remaining Balance (C) divided by the Total of Months Remaining (E)	
Monthly Installments Start (date): Drafts occur on the last Friday of each month	

For Office Use Only:

Approved Installment Increment:

Weekly Monthly

Installment amount to be deducted: \$ _____

Checking Savings MasterCard Visa

Account Name: _____ Last 4 Digits: _____

Name on Account: _____

Terms of Bank Draft/Credit Card Draft Payment Plan

Payments will be drafted as outlined above. Should the draft not be honored by my bank, I am responsible for that payment plus a \$40 NSF fee. If at any time you decide to un-enroll your child, the deposit for each week of camp is non-refundable. Balances must be paid in full by May 27, 2022. For any weeks not paid in full, the child will be unenrolled.

I hereby authorize the Penobscot Bay YMCA to withdraw/charge camp tuition and fees as indicated above. It is understood that my signature constitutes valid notice of such payments due. When said withdrawal/charge takes place, this shall constitute my receipt for payment.

Authorized Signature:

Signature _____
Date

*Please note: Before & After Care must be paid in full upon registration.



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Penobscot Bay YMCA 2022 CAMDEN SNOW BOWL SUMMER CAMP WAIVER Release Form, Waiver of Liability and Indemnity Agreement

Please read carefully before signing below:

On behalf of myself and my child, whose name is set forth below, I hereby release the Town of Camden, its employees, officials, municipal officers, their heirs, successors and assigns, of and from any claims, demands, rights, claims for personal injury or bodily injury and causes of action, of whatsoever kind or nature, including all liability for personal or bodily injury, or loss or damage to personal property, arising from or by reason of any activities in which I or my child engage which occur on or about any facilities operated or maintained by the Camden Parks & Recreation Department, or by the Town of Camden, including any activities specifically sponsored by the Camden Parks & Recreation Department.

Photographs: The Camden Parks & Recreation Department may take pictures or videos of participants at their programs. *Note: Please be aware that pictures may appear in promotional materials and media releases.*

I understand that I and my child are giving up any right to sue the Camden Parks & Recreation Department or the Town of Camden for any claim, demand, or right set forth above. By signing this release, I and my child agree that the Town of Camden and the Camden Parks & Recreation Department, under no circumstances, shall have any liability or responsibility for any injury or loss that I or my child suffer in connection with any of the activities which occur on or about the facilities operated and maintained by the Camden Parks & Recreation Department, or by the Town of Camden.

Indemnification: Furthermore, I agree that I shall indemnify and hold harmless the Town of Camden, its officials, municipal officers, employees, and agents, their heirs, successors and assigns, from any claim, demands, causes of action, judgments or liability whatsoever arising out of or in connection with any activities in which I or my child engage on any premises operated or maintained by the Camden Parks and Recreation Department of the Town of Camden. Such indemnification shall include any reasonable attorney's fees and costs incurred by the Camden Parks and Recreation Department or the Town of Camden in connection with such claims or causes of action.

I specifically agree that I shall indemnify and hold harmless the Town of Camden, its officials, municipal officers, employees, and agents, their heirs, successors and assigns, from any such claims, demands, causes of actions, judgments or liability by a third party, including claims by my child named below, which is not covered by the release set forth above

Authorization: I hereby give my consent to any medical procedures deemed advisable for my child by the Town of Camden, and/or its employees in the event that I cannot reasonably be contacted in sufficient time, given the circumstances of my child's injury and that my child has sustained an injury that reasonably requires treatment.

I HAVE READ THIS RELEASE

Date: _____

Signature of Applicant/Parent _____