Giving Back

Y Camperships – Financial Assistance for YMCA Camp Loma Mar
We believe every child deserves the opportunity to experience overnight camp. Thanks to the generous support of our donors, the YMCA seeks to ensure no child is denied access based on their ability to pay. Funds are limited and are “first come, first served”.

ELIGIBILITY
• All applicants must reside in the service area of The YMCA of the East Bay (most cities in Contra Costa, Alameda, and San Mateo Counties).
• Families must contribute a minimum of $100
• Applicants will be expected to pay the remaining portion of the program fee by two weeks prior to the start of the session.
• Camperships are awarded based on a sliding scale that takes into consideration family size, family situations and gross monthly household income, including employment and non-employment income such as welfare, child support, unemployment, etc.
• Additional documents to verify income may be required. Not all applicants will receive a campership.
• Camperships are approved for a percentage of the full fee of camp and are for the cost of camp only.
• In most cases, camperships will be approved for only one session of camp per family.

APPLICATION CHECKLIST
To ensure your application is valid, please submit all of the following:
_____Completed Campership Application
_____Completed Family Camp Registration Form
_____$100 deposit (refundable if campership is not approved)
_____And ONE of these options for income verification:
   Option 1:
   YMCA of the East Bay members currently receiving financial assistance at a membership branch are automatically eligible for the same percentage campership up to 70%. Include this on step 3 of the application.
   Option 2:
   Most recent Federal Income Tax Return
   Option 3:
   Last 2 months of paycheck stubs for all adults in the household
   Option 4:
   Last 2 months of verification of all other income sources (SSI/TANF/AFDC, Food Stamps, Alimony, etc)
   Option 5:
   Statement of Free or Reduced Lunch for your child

NOTIFICATION & ACCEPTANCE PROCESS
Final approval and processing can take up to two weeks. Failure to submit a valid packet will result in a delay of your application being reviewed. Upon review and approval, parent/guardian will be mailed a notification and will need to accept the awarded campership within two weeks of notification. Failure to accept campership will result in forfeiture of award.

Mail applications to: YMCA Camp Loma Mar, 9900 Pescadero Creek Rd., Loma Mar, CA 94021
### YMCA of the East Bay Overnight Camps Campership Application

Please PRINT clearly!

#### 1. APPLICANT INFORMATION

Please PRINT clearly!

Name of Person Filling Out This Form:

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zip Code</td>
<td>Phone (  )</td>
<td>Email</td>
</tr>
</tbody>
</table>

#### 2. ALL PERSONS LIVING IN THIS HOUSEHOLD

Parent/Adult 1

<table>
<thead>
<tr>
<th>Employer</th>
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Parent/Adult 2

<table>
<thead>
<tr>
<th>Employer</th>
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Child

<table>
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<tr>
<th>Age</th>
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Child

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<th>Age</th>
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Child

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<tr>
<th>Age</th>
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Other dependent(s)

<table>
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<tr>
<th>Age(s)</th>
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</table>

#### 3. Is your child/family currently receiving financial aid at another YMCA of the East Bay branch?

____NO   ____YES (Branch__________________________ % awarded______________________)

#### 4. How much do you feel you can pay?

$______________________

#### 5. MONTHLY HOUSEHOLD INCOME

Fill in boxes with all financial resources your family receives per month.

<table>
<thead>
<tr>
<th>Adult #1</th>
<th>Adult #2</th>
<th>Children</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earnings (Salary, Wages, Commission, Retirement/Pension)</td>
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<tr>
<td>All other assistance: (Alimony/Child Support, SSI/SSA, Disability, Unemployment, Food stamps, HUD) Please indicate amount &amp; source</td>
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#### 6. Please tell us a little about your family’s background or special circumstances that would help us better understand your family’s need for assistance. (Attach additional page if necessary)

#### 7. Is this your family’s first year at this camp? _____Yes _____No

Are any children a Foster Child? _____Yes _____No

Have you received a Campership from us before? ____Yes _____No

#### 8. I certify that the above information is true and complete and that I do not have additional income not represented above. I understand that if I falsify any of the above information, I will not be eligible for assistance now and/or in the future. I understand that camperships are based on need. In the event my child must cancel his/her participation, I will contact the YMCA immediately so campership can be provided to others. I understand the above agreement and my obligations as well as the YMCA’s policies for payments.

Signature of person completing this form

Printed Name

Date

Please Print & Sign form & return to YMCA office indicated on reverse.
YMCA CAMP LOMA MAR
2021 SUMMER FAMILY CAMP REGISTRATION

Primary Adult’s Name: First____________________________________ Last________________________________ Date of Birth_____/_____/_____
Address________________________________ City_____________ Zip_________ E-mail Address______________________________
Home Phone ()_________ Work Phone ()_________ Emergency Contact ____________________________ ()_________

Additional Family members attending family camp (please list all, whether reserving cabin or individual, use back if needed):
Name and age of additional family members ____________________________________________________________
List any known allergies and/or health conditions that may need accommodations while on site: ____________________________________________________________
__________________________________________________________________________________________________________________________________

Rates:
Weekend Program –
- Up to 4 people - $180/person
- 5th person - $170
- 6th person - $160
- 7th person - $150
- 8th person - $140

Weekday Program –
- Up to 4 people - $400/person
- 5th person - $380
- 6th person - $360
- 7th person - $340
- 8th person - $320

<table>
<thead>
<tr>
<th># of family members</th>
<th>CIRCLE Your Preferred Date</th>
<th>Total Fees</th>
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<tbody>
<tr>
<td></td>
<td>WEEKEND DATES:</td>
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<tr>
<td></td>
<td>June 4-6       June 11-13  June 18-20 June 25-27 (FULL)</td>
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<td>July 2-4 (Full) July 9-11 (Full) July 16-18 July 23-25 (Full)</td>
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<td>July 30-Aug 1 Aug 6-8 Aug 13-15 (Full) Aug 20-22 (Full)</td>
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<td>Aug 27-29</td>
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<td>WEEKDAY RATES</td>
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<td>July 5-9 July 12-16 July 19-23 July 26-30</td>
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<td>Aug 2-6 Aug 9-13</td>
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<td>Balance Due one week prior to camp</td>
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PAYMENT/REFUND POLICY
A $100/per family non-refundable deposit will be kept for last minute cancelations. Incomplete registration forms will not be processed. Full refunds will be given should camp be closed due to do unforeseen circumstances.

x ____________________________
“I understand & agree w/ the payment/refund policy.” Parent/Guardian Signature Required

PAYMENT INFORMATION
We accept checks, money orders, and credit/debit cards. (Visa/MC/Discover/Amex)
- PAYNON-REFUNDABLEDEPOSITONLY
- PAYFULLBALANCEOFFEES
CC#________________________ Exp. Date_____/_____/_____/_____/_____
Cardholder: ___________________________ Billing Zip______________

Photographic Waiver/Consent
I give my permission to the YMCA of the East Bay to use my picture or other likeness, or a picture of other likeness of any of my children in the YMCA’s general publicity and campaign materials.
Assumption of Risk I understand that participation in the Climbing Wall/Zipline ("Recreational Activity") and the use of YMCA of the East Bay ("YMCA") facilities and equipment carries inherent risks and dangers that cannot be eliminated regardless of the care taken to avoid injury. The risks include but are not limited to falling off the climbing wall or zipline, rope abrasion, rope entanglement, injuries resulting from fallen climbers or dropped items, equipment failure of ropes, slings, bolts, chains, climbing hardware, anchor points, or failure of any part of the climbing wall structure or zipline structure. These risks may result in injuries that include, but are not limited to cuts, eye injuries, blindness, broken bones, concussions, joint or back injuries, paralysis, and death, as well as damage or loss of personal property. I also understand that these risks and dangers might arise for a variety of reasons, including, but not limited to, actions, inaction or negligence of other parties or the YMCA. I further understand that there may be other risks and dangers that are not known to me or reasonably foreseeable at this time. By my signature below, I acknowledge that participation in the Recreational Activity is voluntary and that I knowingly assume any and all risks, known and unknown.

Waiver and Release of Liability In consideration of being permitted to participate in the Recreational Activity, I, for myself, my spouse, my child(ren), my heirs, personal representative, next of kin, and assigns, voluntarily agree to release, waive, discharge, and covenant not to sue the YMCA and their officers, directors, agents, volunteers, and employees from any and all liabilities for any accident, illness, injury, death, wrongful death, or property damage/loss arising out of my participation in the Recreational Activity and/or use of the facilities and equipment (along with the use of transportation provided, arranged, or paid for by the YMCA, including such transportation for medical treatment), whether occurring on or off the Released Parties’ property, and whether such accident, illness, injury, death, wrongful death, or property damage/loss is caused by the negligence of the Released Parties (excepting gross negligence) or otherwise.

Indemnity Agreement In consideration of being permitted to participate in the Recreational Activity, I voluntarily agree to indemnify and hold harmless the YMCA and their officers, directors, agents, volunteers, and employees from any and all claims, demands, liabilities, causes of action, costs and expenses (including attorneys’ fees) brought as a result of my participation in the Recreational Activity and/or use of the YMCA’s facilities and equipment (along with the use of transportation provided, arranged, or paid for by the YMCA, including such transportation for medical treatment), whether caused by the negligence of the YMCA (excepting gross negligence) or otherwise.

Severability I understand and acknowledge that this Agreement is intended to be as broad and inclusive as permitted by law. If any portion of this Agreement is deemed invalid, it is agreed that the remaining portion of the Agreement shall continue in full legal force and effect.

There is no specified minimum/maximum age for participants. Determination as to who can and cannot use the climbing wall and zipline will be made based on weight requirements of the harnesses and at the discretion of the staff and based on the requirement that the harness must fit participant securely.

Minor Participants If the Participant is under 18 years of age, the Participant’s custodial parent or legal guardian must sign below, warranting that he or she is the Participant’s custodial parent or legal guardian and agreeing to the terms and conditions of this Agreement on both his or her and the Participant’s behalf. Parent or legal guardian acknowledges by their signature that they are giving up the same rights for the minor as they would be giving up if they signed this Agreement on their own behalf.

I have read this Agreement and understand that I am giving up substantial rights by signing this Agreement and do so voluntarily and intend my signature to be a complete release of any and all liability of the Released Parties to the greatest extent allowed by law. I also understand that this Agreement is legally binding on me and my child, spouse, heirs, personal representatives, assigns, and next of kin.

Participant’s Name ___________________________ Date of Birth ___________________________

Participant’s Signature ___________________________ Date ___________________________

Parent/Guardian’s Signature (If Participant is a Minor) ___________________________ Date ___________________________

Parent/Guardian’s Printed Name ___________________________
MEMBER/CHILDREN RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as “releasees”) from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.

2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any, loss, liability, damage or cost they may, incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.

3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE

Date:_________________________  Signature of Applicant/Parent: _

Signature of other Adult: _____

Name of Child in Program:

Name of Child in Program:

Name of Child in Program:

Name of Child in Program: