



**YWCA Vermont Camp Hochelaga**  
A Residential Camp for Girls Since 1919  
**Registration Form**



**Personal Information** (Please complete a separate registration form for each child)

Camper's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade in Fall \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Primary Parent / Guardian \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_ Occupation/Organization \_\_\_\_\_

Secondary Parent / Guardian \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_ Occupation/Organization \_\_\_\_\_

**Emergency Contacts** (must be different than adults listed above)

Name \_\_\_\_\_ Day/Eve Phone \_\_\_\_\_ Relation to Camper \_\_\_\_\_

Name \_\_\_\_\_ Day/Eve Phone \_\_\_\_\_ Relation to Camper \_\_\_\_\_

**Cabin Mate Request**

We will honor one mutual cabin mate request per camper. All cabin mate requests must be made by the parents of both campers. Requested cabin mates **must be of similar age (within 18 mos.)** to ensure an age-appropriate experience for all campers.

I wish my child to be in a cabin with \_\_\_\_\_

**Fees: NEW Tiered Pricing** (similar to Camp Abnaki). This is a voluntary 3-tier pricing helping to offset the operating cost of camp and will not influence the experience the campers receive. This provided families the opportunity to support camp and the "circle of girls" scholarship program.  
PRICE A – Same rate as 2016 does not reflect the true operating cost of camp  
PRICE B – More accurately represents operating costs, including depreciation and wear & tear  
PRICE C – Allows us the opportunity to expand programing and ensure Camp Hochelaga's continued success

Scholarships are available to help fund your daughter attending camp. Applications need to be completed and received before February 9, 2017

**Residential Camp\***

**1 Week Session –A: \$725/B: \$775/C: \$825**

- ☐ RC 1 – June 25 – July 1  
☐ RC 2 – July 2 – July 8  
☐ RC 3 – July 9 – July 15  
☐ RC 5 – July 30 – August 5

**2 Week Session – A: \$1300/B: \$1350/C: \$1400**

- ☐ RC 4 – July 16 – July 29  
☐ RC 6 – August 6 – August 19

**5 Week Leadership (CIT)**

**A: \$1650/B: \$1750/C: \$1850**

Counselor-in-Training – By application only

- ☐ CIT - July 17 - August 19

**Mini Camp –A: \$375/B: \$400/C: \$425**

- ☐ MC 1 – June 26 – June 29  
☐ MC 2 – July 2 - July 5

**Day Camp**

**1 Week Session – A: \$280/B: \$305/C: \$355**

- ☐ DC 1 – June 26 – June 31  
☐ DC 2 – July 3 – July 7  
☐ DC 3 – July 10 – July 15  
☐ DC 4 – July 17 – July 21  
☐ DC 5 – July 24 - July 28  
☐ DC 6 – July 31 – August 4  
☐ DC 7 – August 7 - August 11  
☐ DC 8 – August 14 - August 18

- ☐ YES! I'm interested DC Transportation  
(please choose pick up location, space is limited)  
☐ Bus – Essex High School  
☐ Bus – Chimney Corners, Milton  
☐ Van – Holiday Inn, Williston Road, So. Burlington

**Other Fees**

- ☐ Airport/Bus/Train pick up \$45 each way

**T-shirt Size**    YS \_\_\_\_\_ YM \_\_\_\_\_ Y Lg \_\_\_\_\_  
AS \_\_\_\_\_ AM \_\_\_\_\_ A Lg \_\_\_\_\_ XLg \_\_\_\_\_

**\*For campers staying multiple sessions:**

- ☐ Change over activity fee ...\$70.00

\*For those campers who are staying multiple weeks, there will be activities available for an additional fee of \$70.00. These activities will be fun, away from camp and be an all-day activity. If you chose not to have your camper participate you will have pick up during check out time on Saturday and come back on Sunday during check in.

We will publish camper's name, e-mail in the SCAMP (camper weekly newspaper)

☐ YES    ☐ NO

Swim Lesson Requested?    ☐ YES    ☐ NO

Dietary Preferences / Food Allergies?    ☐ "Traditional"    ☐ Vegetarian    ☐ Gluten Free    ☐ Lactose Impaired

Other (please explain) \_\_\_\_\_

How did you first hear about Camp Hochelaga? \_\_\_\_\_

**Payment Calculation:**

Total Camp Fee (based on selection above) +\$ \_\_\_\_\_  
Change over Activity Fee \_\_\_\_\_  
Transportation Fee +\$ \_\_\_\_\_  
Donation to Scholarship Fund +\$ \_\_\_\_\_

**Total Due** =\$ \_\_\_\_\_

Amount enclosed, must include \$150 deposit ( \_\_\_\_\_ )  
Balance Due on or before May 31, 2017 \_\_\_\_\_

**Balance**

I will pay my balance (due May 31, 2017) by:

- ☐ Check  
☐ Credit Card  
☐ Please process my balance in full on May 31, 2016

**Payment Information****DEPOSIT**

- ☐ I am paying my deposit by enclosed check  
☐ I am paying my deposit by credit card

Credit Card Type: \_\_\_\_\_  
Credit Card Number: \_\_\_\_\_  
Expiration date: \_\_\_\_\_ CCV2# \_\_\_\_\_

- ☐ I am applying for a scholarship from YWCA VT  
Note: scholarship applicants must be able to contribute towards camp.

I am receiving payment from a third party:

-Name of person/organization \_\_\_\_\_

-Phone number of person/organization: \_\_\_\_\_

**Authorizations:** I have read and agree to the terms and policies in the accompanying YWCA of Vermont's Camp Hochelaga Information Bulletin.

It is my wish that my camper enjoy the experiences afforded to the girls at the camp, and I fully understand that, even after reasonable precautions have been taken, many activities such as swimming, boating, or archery, etc. may involve hazards for which the camp cannot be held responsible.

It is also understood that the YWCA of Vermont has permission to use photographs or videotapes taken of my child while at camp for promotion and various publications. Camper designed artwork may be used as well.

It is also understood that campers may be required to inventory their belongings in the presence of staff if the health or safety of the campers or staff indicates the need.

It is my desire that my camper be enrolled, as indicated on the application, subject to the conditions stated within.

In signing this application, I certify that health and accident insurance or Medicaid covers my camper and that I am obliged to provide the camp with the name of the carrier and policy number(s).

To preserve confidentiality, the YWCA of Vermont, Inc., will not release information about its members, staff, volunteers, program participants, Board of Directors, and committees to outside sources without the consent of the individual, her parent or guardian, unless the information released is in the aggregate and has no personally identifying features, or in response to a court order, or is subject to mandatory reporting under Vermont statute.

**Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I wish to attend Camp Hochelaga and agree to do my best to abide fully by the rules of conduct and customs of the camp.

**Camper Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Return this form with your non-refundable \$150 deposit to:  
YWCA VT Camp Hochelaga, 76 Pearl St. Suite 205,  
Essex Junction VT 05452

**eliminating racism**  
**empowering women**  
**ywca**