



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Snow Camp Application

Dates registering for:					
Students Name:					
Date of Birth:			Grade		
School:					
Home address:					
	City		Zip		
Parent/Guardian Name:					
Email Address:					
Cell and Work numbers:	Cell		Work		
Parent/Guardian Name:					
Cell and work numbers:	Cell		Work		
Emergency contact & authorized pick up: (other than parent)					
Phone number:					
Emergency contact & authorized pick up: (other than parent)					
Phone number:					

Are there any medical conditions we should be made aware of such as allergies, asthma or medications?
If yes, please be specific. We also suggest you mention this to the staff at drop off time.

Informed Consent and Release

I understand that the YMCA of Montclair assumes no responsibilities of injuries or illness that my child may sustain as a result of his/her physical condition or resulting from his/her participation in any athletic activities, sports programs, the use of equipment or other activities or programming.

I hereby release and discharge the YMCA of Montclair, its agents and employees for any and all claims for injury, illness, death, loss of damage that my child may suffer as a result of his/her participation in any athletic activities, sports programs, the use of equipment or other activities or programming. I assume all risk for my child's participation in those activities.

I understand that the Montclair YMCA is not responsible for any personal property lost or stolen while in the program. It is recommended that my child does not bring any valuables to the program and if need be, can request that a staff person hold anything of value in a safe place until the end of the program time.

New Jersey State Law requires a medical form on file in our office before the child attends our program. If parents cannot be reached in an emergency, the YMCA will contact the local Rescue Squad and will take your child to the nearest hospital. Continued efforts will be made to reach you.

I, individually and on behalf of my minor child, hereby release and hold the YMCA of Montclair, its assigns and successors, its directors, officers, volunteers, and/or acting on its behalf harmless from all claims that I/we may have arising from activities that I/we may be involved in with the YMCA. I expressly and specifically assume any and all risk of injury, illness, death, or property damage resulting from my/our YMCA activities. I hereby give permission for emergency medical treatment to be administered as deemed appropriate. I understand that the YMCA does not carry insurance to cover injuries and losses that may befall me/us.

HAVING READ, UNDERSTOOD, AND AGREED WITH THESE TERMS, I HAVE EXECUTED THE RELEASE, TO BE EFFECTIVE IMMEDIATELY.

Parent Signature: _____ Date: _____



**YMCA OF MONTCLAIR
VIDEO/PHOTO/AUDIO RECORDING RELEASE**

I hereby give permission for images of my child, captured during YMCA of Montclair events through video, photographic, digital, electronic or any other media together with or without his or her name and hometown, to be used in YMCA of Montclair and YMCA of the USA promotional material and publications (including release to the news media), and waive any rights of compensation or ownership thereto.

I hereby release and hold harmless the YMCA of Montclair, the YMCA of the USA, their agents and representatives and any third parties involved in the creation or publication of the promotional materials from any liability or claims by me or any third party for violations of my personal, proprietary or privacy rights or those of my child in connection with the use of such images.

Child's Name	Age

Parent or Legal Guardian

Printed Name: _____

Signature: _____

Date: _____