

# TRIANGLE Y CAMP REGISTRATION FORM

Please print  
Must be  
legible

Camper's Name \_\_\_\_\_ Gender (circle one) M F  
Session \_\_\_\_\_ Camp Program (i.e. Resident, Horsemaster...) \_\_\_\_\_

*Horsemasters, Please check level of horseback riding experience:*

Beginner  Intermediate  Advanced

Birth Date \_\_\_\_\_ Age at beginning of desired session \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Nighttime Phone \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Nighttime Phone \_\_\_\_\_

Cabin Mates \_\_\_\_\_

*We try to keep campers within one or two years of age and one to two grade school levels in the same cabin.*

*We allow two cabin mate requests.*

"Bring A Friend To Camp" Name \_\_\_\_\_

## Payment Options



Camp Fee Total \_\_\_\_\_

Total Paid \_\_\_\_\_

A minimum of \$75.00 Deposit must be paid at registration

Balance Due \_\_\_\_\_

Camp fees include Trading Post

## CAMP FEES ARE NOT REFUNDABLE OR TRANSFERABLE

### Parent/Guardian Authorization

I hereby give permission for my child to attend Triangle Y Camp and to participate in all associated activities. I understand that the camp does not carry medical insurance and that I will be responsible for any medical charges that my child may incur. **The enclosed deposit is not refundable.** I give permission to the camp administration to use photographs of my child for promotional or any other legitimate purposes.

X \_\_\_\_\_ Date \_\_\_\_\_

### Ways To Register

**Mail:** Triangle Y Camp • Minot Family YMCA • P.O. Box 69 • Minot, ND 58702-0069

**Fax:** Please fax registration form and any requests to (701) 852-1806

**Walk-In:** Completed registrations can be dropped off at the front desk - Minot Family YMCA - 3515 16<sup>th</sup> St. SW - Minot, ND 58701

**Email:** [cmueller@ymcaminot.org](mailto:cmueller@ymcaminot.org)

**On Line:** Web site [www.triangleycamp.org](http://www.triangleycamp.org)

Payment/Deposit: \$100.00

Deposit for each session is required to reserve dates for the requested camp.

The deposit is applied to the total camp fee and is **not refundable**. Payment may be made by check or credit card.

Check enclosed (Payable to Triangle Y Camp)

Use Your Credit Card: Please charge the following amount to my credit card:

Card Holder \_\_\_\_\_ Account Number \_\_\_\_\_



Amount \$ \_\_\_\_\_ Expiration Date \_\_\_\_\_



Program benefits and services are available to all without regard to race, color, sex, handicap, age, or national origin. If you feel you have been discriminated against, write immediately to the Secretary of Agriculture, Washington, DC 20250.

### Additional Information:

Cindy Mueller at the Minot Family YMCA

Phone: (701) 852-0141, FAX (701)852-1806 Email: [cmueller@ymcaminot.org](mailto:cmueller@ymcaminot.org)

Website: [www.triangleycamp.org](http://www.triangleycamp.org)

For all registration, your spot is not confirmed until you receive your "Experience That Lasts a Lifetime" packet.