



Conejo Valley/Miller Family YMCA 2007-8 Y-Indian REGISTRATION FORM



***Please complete this registration form. ALL participants, even returnees, must fill out this form. Items with * are mandatory.**

*Date _____ *T-Shirt Sizes: Parent _____ Child _____ Child _____ *Are you a returning member? Yes ___ No ___

*Last Name _____ *Parent's Name _____

Spouse's Name _____ *Home Phone _____

Cell Phone _____ Work Phone _____

*Address: _____

*City _____ CA Zip _____

E-mail Address: _____ Employer _____

*Child or Children's name

*Name _____ *School _____ *Grade _____ *Birthdate _____

*Name _____ *School _____ *Grade _____ *Birthdate _____

*Name _____ *School _____ *Grade _____ *Birthdate _____

What Tribe?

Check programs you are registering for:

(If no tribe, please write NEW)

___ Y-Papooses (Parent & Child, Pre -K, ages 3-5) _____

___ Y-Indian Guides (Father-Son, Grades K-3) _____

___ Y-Indian Princesses (Father-Daughter, Grades K-3) _____

___ Y-Indian Braves (Mother-Son, Grades K-3) _____

___ Y-Indian Maidens (Mother-Daughter, Grades K-3) _____

___ Trailblazers (Parent-Child, Grades 4 and up) _____

2007-2008 Fees (this Fee Includes an Annual YMCA Program Membership)

Y-Indian Program

1 Parent/1 Child Total	\$190/Pair	(\$184/Pair *Price paid by Sept. 30th)
1 Parent/2 Children	\$234/Tri	(\$227/Tri *Price paid by Sept 30th)
1 Parent/1 Child Y-Indians/1 Child in Trailblazers	\$270/Tri	(\$266/Tri *Price paid by Sept. 30 th)
		(Additional Y-Indian add \$28; Additional Trail add \$40)

Y-Trailblazers

1 Parent/1 Child	\$160/Pair
1 Parent/2 Children	\$200 (Additional Trailblazers add \$40 each)

Miller Family and Conejo YMCA Full Members

Y-Indian Program

1 Parent/1 Child	\$56/Pair
1 Parent/2 Children	\$84/Tri (Additional Y-Indian add \$28 each)

Y-Trailblazers

1 Parent/1 Child	\$40/pair (Additional Trailblazer add \$20 each)
1 Parent/1 Child in Y-Indians/1 Child Trailblazers	\$96/Tri
	(Additional Y-Indian add \$28, Additional Trail add \$20)

Check Enclosed ___ or Charge my Credit Card: MC ___ / Visa ___ / Discover ___	For Staff Use Only
Total Charge _____	Received On _____
Card # _____ - _____ - _____ - _____	Tribe/Club Assigned _____
Expiration Date _____	Staff Initials _____
Card Holder _____ Signature _____	Date _____