



# Conejo Valley/Miller Family YMCA 2008-09 Y-Indian REGISTRATION FORM



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

\*Date \_\_\_\_\_ \*T-Shirt Sizes: Parent \_\_\_\_\_ Child \_\_\_\_\_ Child \_\_\_\_\_ Child \_\_\_\_\_

\*Last Name \_\_\_\_\_ \*Parent's Name \_\_\_\_\_

Spouse's Name \_\_\_\_\_ \*Home Phone \_\_\_\_\_

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

\*Address: \_\_\_\_\_ \*City \_\_\_\_\_ Zip \_\_\_\_\_

Family E-mail Address: \_\_\_\_\_ Employer \_\_\_\_\_

**\*Child or Children's name Registering**

\*Name \_\_\_\_\_ \*School \_\_\_\_\_ \*Grade \_\_\_\_\_ \*Birth date \_\_\_\_\_ Sex \_\_\_\_\_

\*Name \_\_\_\_\_ \*School \_\_\_\_\_ \*Grade \_\_\_\_\_ \*Birth date \_\_\_\_\_ Sex \_\_\_\_\_

\*Name \_\_\_\_\_ \*School \_\_\_\_\_ \*Grade \_\_\_\_\_ \*Birth date \_\_\_\_\_ Sex \_\_\_\_\_

**What Tribe?**

**Check programs you are registering for:**      **Child/ren Name(s)** (Indicate if New or Returning. If returning or Tribe has been identified **also** write tribe name)

\_\_\_ 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)      \_\_\_\_\_

\_\_\_ Trailblazers      (Parent-Child, Grades 4 and up)      \_\_\_\_\_

**2008-09 Fees (Program or Full Facility Membership Required)**

Program	Program Member Rate ( <small>\$80 due at registration</small> )	Full Facility Member Rate
Parent Indian Guides/Princesses/Papooses	\$60** (\$55 by Sept 30)	\$30
Parent Registration Trailblazers Only	\$30	\$20
1st Child Indian Guide/Princess/Papoose	\$60 (\$55 by Sept. 30)	\$30
2nd Child Indian Guide/Princess/Papoose	\$48 (\$44 by Sept. 30)	\$23
3rd Child Indian Guide/Princess/Papoose	\$35 (\$28 by Sept. 30)	\$16
Each Trailblazer Child:	\$30	\$20

**\*\* Parent need only register 1 time regardless of # of kids, Trailblazers included.**

<b>Total Due</b>	\$ _____	\$ _____
<b>Total Paid</b>	\$ _____	\$ _____
<b>Balance Due</b>	\$ _____	\$ _____

**Payment Information:**

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