

CAMP FITCH

YMCA on Lake Erie

A GREAT CAMP
ON A
GREAT LAKE

12600 Abels Rd North Springfield, PA 16430 814-922-3219 Fax: 814-922-7000

www.CampFitchYMCA.org

info@campfitchymca.org

Family Camp is great opportunity for any family looking for a week long vacation. Families love the comfortable camp atmosphere that has something for everyone. Nothing beats spending time as a family in the outdoors enjoying nature, making new friends, and trying the various camp activities. Since meals are also included in the cost, one could consider Family Camp an all inclusive vacation!

In addition to all the usual camp activities, Camp offers age group programming several times a day for the kids and at night for the adults. Campers are encouraged to attend the age groups activities but attendance isn't mandatory. Even adults with young children can attend the night activities as families can hire a camp staff babysitter.

At Family Camp, each family has their own "cabent." Many families turn their cabent into a home by including carpeting, chairs, and card tables. Bathrooms are within easy walking distance to each cabent with separate male and female facilities. Family style meals are served in our new Dining Hall.

Dates for Family Camp 2010

Week 1 August 8 - 14

Week 2 August 15 - 21

Rates for Family Camp 2010 (if one member of family is Y-member, all members receive discount)

Adults and Children 9 and up - Y-member rate \$460 per person

- Non-Y member rate \$525 per person

Children 8 and under - \$53 per year of age

CAMP FITCH YMCA

2010 FAMILY CAMP

REGISTRATION FORM

- ➔ Complete the application indicating which week your family is interested in attending
- ➔ Mail to: Camp FitchYMCA
12600 Abels Rd
North Springfield, PA 16430
- ➔ Questions? Visit us at www.campfitchymca.org or
Phone at 814-922-3219



cut here

2010 FAMILY CAMP REGISTRATION FORM

Week 1 August 8 - 14

Week 2 August 15 - 21

YMCA member in family? Y / N

Last Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____

Parent #1 First Name: _____ Parent #2 First Name: _____

Children's Names and Ages (at time of Camp): _____

PAYMENT: A \$200.00 deposit must accompany each application for each cabent. This deposit is non-refundable and non-transferable, but is applied to the total fee. Please make checks payable to YMCA Camp Fitch or fill in information below.

Credit Card #: _____ Exp. Date ____/____

Amount: \$ _____ Signature _____

Office Use Only:
CABENT #: