

Session	Traditional	Specialty	Extended Day	Transportation
Session 1 June 20 - July 1	<ul style="list-style-type: none"> <input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive 	<ul style="list-style-type: none"> <input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> Survivor <input type="checkbox"/> Horseback Riding <input type="checkbox"/> STEM Session 1 <input type="checkbox"/> Art <input type="checkbox"/> Musical Theater 1 (Grades K -4) <input type="checkbox"/> NASA Astro 	<ul style="list-style-type: none"> <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Both 	<ul style="list-style-type: none"> <input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____
Session 2 July 5 - July 15	<ul style="list-style-type: none"> <input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive 	<ul style="list-style-type: none"> <input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> Survivor <input type="checkbox"/> Cooking <input type="checkbox"/> Musical Theater 2 (Grades 4-7) <input type="checkbox"/> MTC Workshop (K-3) <input type="checkbox"/> Art 	<ul style="list-style-type: none"> <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Both 	<ul style="list-style-type: none"> <input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____
Session 3 July 18 - July 29	<ul style="list-style-type: none"> <input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive 	<ul style="list-style-type: none"> <input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> Survivor <input type="checkbox"/> Musical Theater 3 (Grades 7-12) <input type="checkbox"/> Art 	<ul style="list-style-type: none"> <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Both 	<ul style="list-style-type: none"> <input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____
Session 4 August 1 - 12	<ul style="list-style-type: none"> <input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive 	<ul style="list-style-type: none"> <input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> Survivor <input type="checkbox"/> Horseback Riding <input type="checkbox"/> Musical Theater 4 (Grades 4-7) <input type="checkbox"/> Art 	<ul style="list-style-type: none"> <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Both 	<ul style="list-style-type: none"> <input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____
Session 5 August 15 - 26	<ul style="list-style-type: none"> <input type="checkbox"/> Tee Pee <input type="checkbox"/> Pioneer <input type="checkbox"/> Discoverer <input type="checkbox"/> Explorer <input type="checkbox"/> Voyager <input type="checkbox"/> Adventurer <input type="checkbox"/> Navigator <input type="checkbox"/> Adaptive 	<ul style="list-style-type: none"> <input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Skateboarding <input type="checkbox"/> Fishing <input type="checkbox"/> Dance Camp (Grades 1-12) <input type="checkbox"/> Art <input type="checkbox"/> STEAM Camp 	<ul style="list-style-type: none"> <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Both 	<ul style="list-style-type: none"> <input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus <input type="checkbox"/> Bus _____ <input type="checkbox"/> Stop _____

Total Camp Fees: _____
 One time Camp Improvement Fee + \$30 _____
 Total Amount Due: \$ _____
 Auto Draft Amount \$ _____

Office Use Only

- Complete and signed registration form
- Auto draft set up
- Medical form received
- Camp start date
- Parent/Guardian waiver signed

Staff name _____ Date _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

My signature below signifies that I have read and agree with all information in the Mountain Mist Day Camp Information Booklet, and will read and review the camp rules and policies with my camper.

~ **I understand that state law prohibits my child from attending camp without the medical forms completed by a physician within 36 months prior to attending camp, and that medical forms must be online in Camp Docs the MONDAY BEFORE the beginning of a camp session.**

~ I authorize the YMCA officials to secure medical/emergency attention and treatment for the camper listed above.

~ I give my child permission to participate in all daily camp activities unless otherwise noted in writing.

~ Permission is granted for the camper listed above to participate and be transported to off site programming with the understanding that YMCA leadership will be provided.

~ I understand that it is my responsibility to meet my child at the appropriate bus stop at the designated pick up/drop off location on time every day unless permission is granted otherwise.

~ My permission is also granted for the YMCA to take/use photographs, slides, moving pictures, or videotapes of the camper named on this application.

~ I understand there is a **\$100 deposit per child, per session, and must be paid at registration.**

~ I also understand there is a **one-time \$30 Camp Improvement Fee, per child due at registration.**

~ I agree to pay the balance of the camp fee by the required deadlines prior to my child attending Mountain Mist Day Camp, and **that the refund of these fees will be considered according to the refund policy listed in the camp booklet.**

~ I agree that it is my responsibility to notify the Meriden-New Britain-Berlin YMCA in the event that I cancel my credit/debit card. I will also notify the Y when I receive a new expiration date on my card. If for some reason a transaction will not post (i.e. account closed, account suspended, insufficient funds), I understand that I will be charged a \$20 fee.

~ I understand that if my payment isn't received prior to the start of the next session, then my child will not be able to attend Mountain Mist Day Camp that session until payment is made.

The undersigned voluntarily agrees to hold the YMCA harmless for injuries or accidents resulting in bodily injury or property damage during my child's participation in programs at the Mountain Mist Day Camp. I further waive, release, absolve, and indemnify the Meriden-New Britain-Berlin YMCA, Mountain Mist Day Camp, its directors, volunteers, officers, or employees for the injuries or accidents which occur while participating in the programs of Mountain Mist Day Camp.

Date

Parent/Guardian Name (print)

Parent/Guardian Signature

MERIDEN-NEW BRITAIN-BERLIN YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.

MERIDEN YMCA

110 West Main Street
Meriden CT 06451

P 203 235 6386 **F** 203 634 6517

www.meridenymca.org

facebook.com/YMCA.Meriden

NEW BRITAIN YMCA

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BERLIN YMCA

532 New Britain Road
Kensington CT 06037

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**YOUTH CAMP HEALTH EXAM/RECORD
FOR CAMPERS AND STAFF**
Physical Exams Are Valid For 3 Years
From Date of Last Examination

- Camper
- Staff

Please Return Completed Form to the Camp

Name _____ Date of Birth _____ Phone _____
 Guardian _____ Address _____
 Emergency Contact _____ Telephone _____
 Date of Arrival at Camp: _____ Departure Date: _____

TO BE COMPLETED BY THE HEALTH CARE PROVIDER

Date of Exam ____/____/____

May participate in all camp activities YES NO

May participate except for: _____

Does the individual have any known medical or emotional illness or disorder that poses a risk to other children or which affects the individual's functional ability to participate safely in a youth camp? YES NO

If yes, please explain _____

Are there any prescription or over the counter medication(s) this individual needs to take while at camp? YES NO

If yes, indicate names of medication(s): _____

NOTE: A written authorization and parent permission for the administration of medication at camp are required.

Does the individual have any disabilities or special health care needs such as allergies, special dietary needs? YES NO

If yes, please explain _____

NOTE: If the camper has a special health care need or disability that requires special care be taken or provided during the time the individual is at camp, an individual plan of care shall be developed with the parent and health care provider and updated as necessary. The plan shall include appropriate care of the camper in the event of a medical or other emergency and signed by the parent and staff responsible for the care of the camper.

If camper/staff is school aged or younger, have they been immunized in accordance with the schedule adopted by the Commissioner of Public Health pursuant to section 19a-7f of the Connecticut General Statutes? YES NO

Additional Comments:

Printed Name of Health Care Provider: _____

Address: _____ Phone: _____

Signature of Physician, PA, APRN or RN _____ Date Form Signed: _____



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FIND YOUR FUN

MERIDEN YMCA
MOUNTAIN MIST DAY CAMP



2022 Camp Lawn Sign Program

Display a Mountain Mist Day Camp sign on your lawn for a minimum of one month and save! Savings are per child, for one session.

Register on these dates and save:

January 24-31, 2022	\$30 (Promo code Camp2022-30)
February 1 - 28, 2022	\$25 (Promo code Camp2022-25)
March 1 -31, 2022	\$20 (Promo code Camp2022-20)
April 1 - 30, 2022	\$15 (Promo code Camp2022-15)

I agree to display a Meriden YMCA Mountain Mist Day Camp sign on my lawn (or on my porch or in my window) for a minimum of one month.

Name _____

Address _____

Phone Number _____

Email _____

Date _____

The Meriden YMCA deliver it to you and install it in your yard.

Thank you for choosing Mountain Mist Day Camp.

MERIDEN YMCA

110 West Main Street Meriden, CT 06451
P 203 235 6386 F 203 634 6517 www.meridenymca.org
Become a fan on facebook.com/YMCA.Meriden



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Dear Parents,

This summer, Mountain Mist Day Camp is partnering with CampDoc to better serve our participants and staff. CampDoc offers an electronic health record system for camps, and you can now complete your participant's health information electronically.

The security and privacy of your participant's health information is important to us. The CampDoc site is secure, encrypted, and password protected. You can find additional information about CampDoc privacy and security information at www.docnetwork.org/security.

After signing up for your program, you will receive an "Invitation" email from CampDoc.

- Click on the green "**Accept Invite**" link within the email to create your CampDoc account.
- In the **Confirm Email** box, type your *email address* in order to confirm.
- In the **Password** box, type the password that you want to use.
- Click the **CONTINUE** button.

After you log in, select your participant's name and click on the health profile link to complete your participant's information.

Required questions will be marked with an * and outlined in red. Upload any required documents to your CampDoc account. If you're on a phone/tablet, you can take a picture to upload the document.

Keep in mind that you can return to app.campdoc.com at any time to make updates to your participant's health information before your program begins. You can log in using the email address and password you previously created.

We're excited to let you know that your participant's health information will save from year-to-year, so once you complete it in CampDoc this season, you won't have to start from scratch next year.

Additionally, CampDoc sends out periodic reminder emails for incomplete health information. These notifications come from campdoc.com, so please add this to your safe sender list to avoid accidental delivery to junk and spam folders. We don't want you to miss important notices about Mountain Mist Day Camp!

Please note that CampDoc supports the current and previous major releases of [Chrome](#), [Firefox](#), [Microsoft Edge](#), and [Safari](#) which provide improved security and performance for health information.

For additional assistance, you can navigate to support.campdoc.com or contact our Support Team at support@campdoc.com or 734-636-1000.

We are excited to continually improve, building safer, more productive and more efficient systems to create the best experience for you and your family!

We can't wait to see you this summer,

Mountain Mist Staff

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Bus Stops

In order to provide safe, reliable, and quality transportation services to our campers and their families, the camp uses preselected bus routes throughout the summer.

Our buses are staffed by Mountain Mist counselors to and from camp daily. We cannot accommodate individual bus stops.

Bus Schedule

White Oak

- 8:15 West Fort & Allen Ave 3:35
- 8:18 Finch Avenue & Country Lane 3:38
- 8:22 West Main St. & Gwen Rd. 3:40
- 8:24 West Main St. & Castle Drive 3:41
- 8:26 West Main St. & Spruce St. 3:45
- 8:32 John Barry School 3:25
- 8:35 State St. & Mill St. 3:22
- 8:43 East Main St & Paddock Ave. 3:14
- 8:48 Ocean State Job Lot Plaza 3:09
- 8:51 Cone Ave./Thorpe Ave./Birdsey Intersection 3:06
- 8:52 Thorpe Ave & High Hill 3:05
- 8:54 High Hill Rd. & Collindale 3:03
- 8:56 High Hill Rd. & Fleming 3:01
- 9:00 Mountain Mist Day Camp 3:00

Red Maple

- 8:00 Stop & Shop (Rte. 10 Cheshire) 4:00
- -- Route 70 Commuter Lot (PM Only) 4:15
- 8:15 Knob Hill/Race Brook 3:45
- 8:19 Hanover School (Main Street) 3:40
- 8:29 Old Navy Plaza (Route 5) 3:30
- 8:34 Ceppa Field 3:25
- 9:00 Mountain Mist Day Camp 3:00

MOUNTAIN MIST DAY CAMP

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Purple Pine

- 8:10 Berlin Movie Theater 19 Frontage Road 3:45
- 8:32 Broad St. & Blackstone Village 3:28
- 8:40 Sherman Ave. & Warren St. 3:23
- 8:45 Israel Putnam 3:19
- 8:48 Yale Ave. & Scott St. 3:16
- 8:50 Thomas Hooker School 3:11
- 8:55 Paddock Ave. & Murdock Ave. 3:08
- 9:00 Mountain Mist Day Camp 3:00

Green Aspen

- 8:14 North Colony & Hill St. 3:15
- 8:16 North Colony & Nancy Lane 3:18
- 8:18 Hicks Ave. & Gracey Ave. 3:20
- 8:24 Commuter Lot (2026 North Broad Street) 3:24
- 8:30 Nathan Hale School (Atkins Street) 3:10
- 8:35 Roger Sherman School (N. Pearl Street) 3:07
- 9:00 Mountain Mist Day Camp 3:00

Blue Spruce

- 8:00 Colony St. & Colony Place 4:00
- 8:10 Lincoln Middle School 3:50
- 8:15 Ben Franklin School 3:45
- 8:25 Meriden YMCA 3:40
- 8:39 Old Colony & Gypsy Lane 3:20
- 9:00 Mountain Mist Day Camp 3:00

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