



## 2026 Mountain Mist Day Camp Registration Form

CAMPER FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
 STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_  
 GENDER: **M** or **F** Grade completed as of 6/26: \_\_\_\_\_ **PRIMARY MEMBER CELL**  
**PHONE:** \_\_\_\_\_  
**EMAIL ADDRESS OF PRIMARY MEMBER:** \_\_\_\_\_

Session	Traditional	Specialty	Extended Day	Transportation
<b>Session 1</b> June 17 - 26  (Camp starts on Wednesday June 17. Please note this is an 8 day session. We will prorate the cost per day for the session.)	<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	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Art <input type="checkbox"/> Cooking	<input type="checkbox"/> AM  <input type="checkbox"/> PM  <input type="checkbox"/> Both	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
<b>Session 2</b> June 29 - July 10	<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	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> STEM <input type="checkbox"/> Cooking <input type="checkbox"/> Art	<input type="checkbox"/> AM  <input type="checkbox"/> PM  <input type="checkbox"/> Both	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
<b>Session 3</b> July 13 - July 24	<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	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Cooking <input type="checkbox"/> Art	<input type="checkbox"/> AM  <input type="checkbox"/> PM  <input type="checkbox"/> Both	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
<b>Session 4</b> July 27 - August 7	<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	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fort Building <input type="checkbox"/> STEM <input type="checkbox"/> Art <input type="checkbox"/> Cooking <input type="checkbox"/> Pathfinders W 1 <input type="checkbox"/> Pathfinders W2	<input type="checkbox"/> AM  <input type="checkbox"/> PM  <input type="checkbox"/> Both	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____
<b>Session 5</b> August 10 - 21	<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	<input type="checkbox"/> Sports <input type="checkbox"/> Gymnastics <input type="checkbox"/> Fishing <input type="checkbox"/> STEM <input type="checkbox"/> Dance Camp (Grades 1-12) <input type="checkbox"/> Art <input type="checkbox"/> Cooking	<input type="checkbox"/> AM  <input type="checkbox"/> PM  <input type="checkbox"/> Both	<input type="checkbox"/> AM Parent Drop Off <input type="checkbox"/> AM Bus Bus _____ Stop _____ <input type="checkbox"/> PM Parent Pick Up <input type="checkbox"/> PM Bus Bus _____ Stop _____

**Office Use Only**

Total Camp Fees: \$ \_\_\_\_\_ Campership Y\_\_ No \_\_  
 One time Camp Improvement Fee + \$35 Financial Y\_\_ No \_\_  
 Total Amount Due: \$ \_\_\_\_\_ Care4Kids Y\_\_ No \_\_  
 Auto Draft Amount \$ \_\_\_\_\_ DCF Y\_\_ No \_\_

**Office Use Only**

Complete and signed registration form  
 Auto draft set up  
 Payment waiver received  
 Camp start date  
 Parent/Guardian waiver signed  
 Staff name \_\_\_\_\_ Date \_\_\_\_\_



**Meriden-New Britain-Berlin YMCA  
Summer Camp Program**

Authorization for Reoccurring Credit/Debit Card Transactions

I, \_\_\_\_\_ give the Meriden New Britain-Berlin YMCA authorization to process my summer camp payments by Credit/Debit Card or bank account.

Child(ren) Name(s): \_\_\_\_\_

Transactions will be processed weekly, every Monday (in advance), in the amount of

\$ \_\_\_\_\_

**It will be my responsibility to notify the Meriden-New Britain-Berlin YMCAs in the event that I cancel my credit/debit card. I will also notify the YMCA when I receive a new expiration date on my card.**

**If for some reason a transaction will not post (account closed, account suspended, insufficient funds, etc.), I will be charged a \$25.00 re-draft fee by the YMCAs ECASH system, which is a collection system that will go after collecting the missed payment(s).**

Name as it appears on the card (Please Print): \_\_\_\_\_

Address connected to the card: \_\_\_\_\_ Zip Code: \_\_\_\_\_

- MasterCard
- Visa
- American Express
- Discover

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Security Code (as it appears on the back of the card): \_\_\_\_\_ OR:

- EFT Bank Account: Checking or Savings  
Routing# \_\_\_\_\_  
Account# \_\_\_\_\_

**By signing below I acknowledge that I agree to the statements written above and also give the Meriden-New Britain-Berlin YMCA my permission to charge the card or account above for my weekly program payments. I also understand that a written 2 weeks' notice is required for withdrawing from all summer camp programs.**

Cardholder Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

Dear Parents,

Meriden-New Britain YMCA summer camps work with CampDoc to better serve our participants and staff. CampDoc offers an electronic camp information record system for camps, and you can now complete your participant's camp information electronically.

The security and privacy of your participant's camp 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](http://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](http://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](http://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](http://support.campdoc.com) or contact our Support Team at [support@campdoc.com](mailto: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 Day Camp Staff

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

**MERIDEN YMCA**  
110 West Main Street  
Meriden CT 06451  
203 235 6386  
[www.meridenymca.org](http://www.meridenymca.org)

**NEW BRITAIN-BERLIN YMCA**  
50 High Street  
New Britain CT 06051  
860 229 3787  
[www.nbbymca.org](http://www.nbbymca.org)



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## FIND YOUR FUN

### MERIDEN YMCA MOUNTAIN MIST DAY CAMP



### 2026 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:**

February 7	\$50 + \$50 Y Bucks towards a future program
February 8 - 28	\$35
March 1 -31	\$25
April 1 - 30	\$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 \_\_\_\_\_

Please select one:

I picked up a sign when I registered.

Please have the Meriden YMCA deliver it to me and install it in my yard.

Thank you for choosing Mountain Mist Day Camp.

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

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