

Camp Jewell YMCA
 A branch of the YMCA of Greater Hartford
 6 Prock Hill Road
 P.O. Box 8
 Colebrook, CT 06021



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Volunteer Work Weekend Registration

Work Weekend: Spring Fall

Family Last Name _____ Primary Contact Person _____

Phone Number _____ Email Address _____ This is our _____ year attending work weekend

Family Address _____

City _____ State _____ Zip _____ Country _____

Families may choose one of following three options.

OPTION I
 Cabins 1A through 9B (18 available cabins)
 Private sleeping room and bath/shared living room
 Cabin Request: 1: _____ 2: _____ 3: _____ 4: _____
 Will you be sharing your cabin with another family? Yes No
 Family Name(s): _____

OPTION II
 Boathouse Cabin (1 available)
 Private sleeping room/shared bath and living room
 Will you be sharing your cabin with another family? Yes No
 Family Name(s): _____

OPTION III
 Seniors Cabin
 Shared sleeping room, bath, and living room
 How many members of your family will be staying in Seniors? _____

Please list those in your family who will be attending volunteer work weekend.

1: _____ Age: _____
 2: _____ Age: _____
 3: _____ Age: _____
 4: _____ Age: _____
 5: _____ Age: _____
 6: _____ Age: _____
 7: _____ Age: _____
 8: _____ Age: _____
 9: _____ Age: _____
 10: _____ Age: _____

Does anyone in your family have a special dietary or other request? _____

I realize that even after reasonable precautions are taken some activities such as but not limited to swimming, hiking, horse riding, boating, and climbing may involve inherent risks for which Camp Jewell YMCA cannot be held responsible. I authorize the YMCA to have and use the name, photographs, slides, and video of the person(s) named on this registration form in camp promotional materials. I understand that while every effort is made to honor cabin and family requests there is no guarantee.

Family Representative Signature _____ Date _____