

2025 CAMP CORMORANT REGISTRATION FORM

Please send completed form and deposit to: YMCA of the Northern Sky | Attn: Summer Camp | 400 1st Ave S, Fargo, ND 58103

CAMPER INFORMATION

Full Name **Date of Birth** **Date of Registration** **Age at Camp** **Gender**

Camper's Address
Street Address

City State Zip Code

Phone Number **Does this camper have food allergies?***
 Yes (list below) No

Is the camper a foster child, or from a military family?
 Military Foster None

DEPOSIT/PAYMENT INFORMATION: Please do not send cash.
Remainder of fee is due two weeks before your registered session, or your spot will be given to a child on the waiting list. Deposits are non-refundable.
Deposits are \$100/session for Overnight Camp/Family Camp, and \$50/session for Day Camp.

Money Order Check Enclosed Deposit Amount \$

Does the YMCA have permission to use photos/videos of this camper for public and/or promotional purposes?
Daily activity photos of overnight campers are posted on the Camp Cormorant Facebook page - stay tuned to see what adventures your child is having!
 Yes No

How did you hear about Camp Cormorant?

PARENT INFORMATION

PARENT/GUARDIAN #1 **Full Name** **Date of Birth**

Email Address **Cell Phone**

Relationship to Child **Work Phone**

PARENT/GUARDIAN #2 **Full Name** **Date of Birth**

Email Address **Cell Phone**

Relationship to Child **Work Phone**

OVERNIGHT CAMP

Camp Attending
For example, Ropes Course, Horsemanship, Water Ski, etc.

Session(s) Attending
 1 2 3 4
 5 6 7 8*

Cabin Mate Request - Limit 1

We try our best to room campers together if similar age but it is not a guarantee.

*mini camp/only adventure camp

FAMILY CAMP

Family Camp August 1 - 3

of Adults Attending **# of Children Attending**

Ages of Children

DAY CAMPS

Session(s) Attending
 1 2
 3 4
 5 6
 7 8*

*mini camp/only adventure camp

Parent/guardian must sign before registration is accepted. I understand that rules for campers are the same for everyone without regard to race, color, national origin, gender, or disability. All campers are treated as individuals and respect is shown for a range of abilities/behaviors. I am aware of the following policies: Deposits are non-refundable and due at time of registration. Remainder of camp fee is due two weeks before the start date of registered session. No refunds are given for cancellations received within 14 days of registered session or after June 1, 2025. No refunds are given for campers who leave camp early or do not attend for any reason. Parents/guardians have read and agree to all conditions of this registration.

Signature of parent/guardian: _____

Date: _____





YMCA Camp Cormorant

Camper's Name: _____ **Session:** _____

Waivers

Horseback Riding Waiver:

The camper named above has my permission to participate in the horseback riding program at YMCA Camp Cormorant. As the parent/guardian of this child, I recognize the inherent risk that is involved in horseback riding and being around horses and agree to hold the YMCA and its officers, directors, employees and agents harmless from any and all claims, including but not limited to claims of personal injury, death, property damage or any other loss or damage that may arise from my child's participation in the horseback riding program.

Parent/Guardian Signature: _____ Date: _____

Shark Ride (inflatable pulled behind boat ride) Waiver:

The camper named above has my permission to participate in the riding the Shark at YMCA Camp Cormorant. As the parent/guardian of this child, I recognize the inherent risk that is involved in riding the Shark and agree to hold the YMCA and its officers, directors, employees and agents harmless from any and all claims, including but not limited to claims of personal injury, death, property damage or any other loss or damage that may arise from my child's participation in the riding the Shark.

Parent/Guardian Signature: _____ Date: _____

Photo Release Waiver: The YMCA of Cass and Clay Counties & YMCA Camp Cormorant have permission to utilize my name and any photos or videos taken of me for publicity purposes. If NO, do not sign below.

Parent/Guardian Signature: _____ Date: _____

Ropes Course & Zip Line Waiver:

The camper named above has my permission to participate in the Ropes Course/Zip Line program at YMCA Camp Cormorant. As the parent/guardian of this child, I recognize the inherent risk that is involved in the Ropes Course/Zip Line and agree to hold the YMCA and its officers, directors, employees and agents harmless from any and all claims, including but not limited to claims of personal injury, death, property damage or any other loss or damage that may arise from my child's participation in the Ropes/Zip Line program.

Parent/Guardian Signature: _____ Date: _____

Water Ski/Knee boarding Waiver:

The camper named above has my permission to participate in the Water Ski/Knee boarding program at YMCA Camp Cormorant. As the parent/guardian of this child, I recognize the inherent risk that is involved in the water skiing/knee boarding and agree to hold the YMCA and its officers, directors, employees and agents harmless from any and all claims, including but not limited to claims of personal injury, death, property damage or any other loss or damage that may arise from my child's participation in the Water Ski/Knee boarding program.

Parent/Guardian Signature: _____ Date: _____