

NYYM Summer Sessions Registration for One Adult

Silver Bay YMCA, Silver Bay, NY July 22–28, 2018

BEFORE July 18 return to: NYYM, 15 Rutherford Place, New York NY 10003

*AFTER July 18 send to: Silver Bay YMCA of the Adirondacks, 87 Silver Bay Rd.,
Silver Bay NY 12874; 518-543-8833*

PLEASE PRINT

Name _____ Meeting _____

Address _____

City _____ State _____ Zip _____

Day phone (____) _____ Evening phone (____) _____

E-mail address _____

Check all that apply:

- Young Adult Friends (ages 18–35)
- First time at Summer Sessions
- JYM Volunteer
- Vegetarian
- Do not list me as attending
- Female
- Male

Worship Groups (check only one)

- Adults with young children
- Caregivers
- Conflict Transformation
- Earthcare General Aging
- Lesbian, gay, bisexual, transgendered
- Men's Racial Healing
- Women's Unprogrammed

Special needs: hearing seeing walking other: _____

I will volunteer for: Golf cart driver Microphone carrier

Assisting Friends with special needs PM Childcare Healing Ctr.

Silver Bay YMCA Housing:

Arrival day & date _____ **Departure day & date** _____

I prefer the same room assignment as last year

First choice _____ Rate: \$ _____

Second choice _____ Rate: \$ _____

If neither is available, **location** is more important

If neither is available, **price** is more important

Name of parent/chaperone/other roommate _____

I will cluster with _____

Please assign me a roommate _____

I will stay off-campus at (name/address) _____

_____ I am eating all meals on campus

Only these meals: _____

Request for financial assistance (due 7/2/18)

Source of funds: Private \$ _____

Provided by monthly/regional meeting \$ _____

Requested from Equalization Fund \$ _____

Registration fee enclosed (see fee chart on nnym.org) \$ _____

Donation to Equalization Fund (tax deductible) \$ _____

Donation to support AM Childcare (tax deductible) \$ _____