

Bring A New Participant Incentive

Bring a new participant to this year's Women's Getaway Weekend and receive \$25 off your registration fee. When you refer a new participant to the Women's Getaway Weekend, we will discount your registration \$25 prior to the weekend, should the participant not attend, you will be billed the difference at the end of the weekend.

This discount can only be applied once/weekend.

I heard about camp from: _____



To Register, Please Fill Out and Return Form

Mail form to:

YMCA Camp Kresge
Attn: Women's Getaway Weekend
382 Camp Kresge Lane
White Haven, PA 18661

Email form to:

Christine Kropp, Camp Registrar at christine.kropp@wbymca.org

Register Online at:

www.wbymca.org/programs/

For More Information about Women's Getaway Weekend

Contact Devin Polhemus, Camp & Conference Director at 570-443-2267 or email devin.polhemus@wbymca.org.



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



Women's Getaway Weekend
September 14-16, 2018
Wilkes Barre Family YMCA
YMCA Camp Kresge

Join us for a fun filled getaway at Kresge!

This event includes:

Delicious and healthy meals, wine & cheese social, archery, canoeing, nature crafts, high ropes experience, hiking, climbing tower, as well as opportunities to relax and read a good book, and private massages (by appointment, additional fee)



Dates & Fees

Check In: Friday, Sept. 14, 5:30-6:30 pm
 Check Out: September 16, 9:30-11:00 am

Y Member: \$75 | Non Member: \$90
 Upgraded Cabin: \$35

(Available on a first come, first served basis. Please call the Camp Office at 570-443-2267 for availability)

What to Pack:

Lawn chairs, bedding, (sheets/sleeping bag, pillow, blankets) comfortable clothing, hiking shoes, sweatshirt, toiletries, bug spray, sunscreen, and a camera!
 Optional: yoga mat, a good book

2018 Women's Getaway Weekend Registration Form

Email Address: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Secondary Phone: _____ DOB: _____ (must be at least 21)

Emergency Contact: _____ Phone: _____

I wish to bunk with: _____

Please Select the Appropriate Rate

YMCA Member Rate (\$75) Non Member Rate (\$90)

YMCA Member at: _____

Payment Options

Enclosed is a check for \$ _____

(Please make all checks payable to the Wilkes-Barre YMCA)

Please bill my credit card:

Credit Card #	
Three-Digit Code (Back)	
Amount to be charged	
Name on Card	
Expiration Date	
Authorized Signature	

Visa MasterCard Discover AmEx

- I give consent to and authorize the use and reproduction of any photographs, video footage, or audio for use by the YMCA. I also understand that there will not be compensation for use of any such media.
- I understand that I will be given a waiver and health history form, and that each form must be completed, signed and returned before I may participate in any activities or programs at YMCA Camp Kresge.

Signature: _____ Date: _____