



**Williams/duPont Family YMCA**  
**Adventure Guide Registration**  
*We build strong kids, strong families, strong communities.*

**Adventure Guides/ Princesses:**                      **Boys & Girls ages 5-11, grades K-5**  
**Trailblazers:**    **Boys & Girls ages 12-14, grades 6-7**  
 FOR MORE INFO GO TO :  
 www.timucuan.org or email info-timucuan@comcast.net

**Please Complete the Following information (One per Child)**

Parent's Name \_\_\_\_\_ Sex \_\_\_\_\_ Relationship to child \_\_\_\_\_

Birth date w/Year \_\_\_\_\_ Program Name \_\_\_\_\_ Shirt Size \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Fax: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Sex \_\_\_\_\_ Birth date w/ Year \_\_\_\_\_

Tribe: \_\_\_\_\_ Nation: \_\_\_\_\_

**Years in Program: New 1 2 3 4 5+ (please circle one)**

Guide [  ] Princess [  ] Trailblazer [  ]

Please Check the one that applies to your child

School: \_\_\_\_\_ Grade: K 1 2 3 4 5 6 7

Please circle one

Shirt Size: \_\_\_\_\_

**Program Fees for Adventure Guides/Princesses Non-Members**

1st Child \$60    Any Additional Children \$30

\*For all New Participants please add \$20 per child for a Supply Fee

**Total Cost:** \_\_\_\_\_

**Program Fees for Trailblazers**

**Member No.:** \_\_\_\_\_ **Branch** \_\_\_\_\_

\$20 for each child

**Total Cost:** \_\_\_\_\_

**Program Fees for Adventure Guides/Princesses YMCA Members**

**Member No.:** \_\_\_\_\_ **Branch** \_\_\_\_\_

1st Child \$30    Any Additional Children \$20

\*For all New Participants please add \$20 per child for a Supply Fee

**Total Cost:** \_\_\_\_\_

**For Staff Use Only**

Fees Paid	Check #	Staff Initial	Date Paid

Make Checks payable to YM CA

**FOR NEW TRIBE MEMBERS ONLY**

This organizational event you are attending is designed to place you and your child in a "tribe" with others in your geographical and/or school area. Below we have provided you with an area to write in some important information you need to get started with your new tribe.

Our Tribe Name \_\_\_\_\_ Our Tribe Sponsor \_\_\_\_\_

Sponsor's Phone No.: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Our first meeting is on: \_\_\_\_\_ Time: \_\_\_\_\_ Location \_\_\_\_\_

Mission Statement: To put Christian principles into practice through programs that build a healthy spirit, mind, and body for all.

**Please read and complete waiver on reverse side**

