



SEPTEMBER EVENTS REGISTRATION FORM

STEP ONE:

Please check the box(es) of the events you are registering to attend.

STEP TWO:

Total the # of hours or \$ due. Please indicate if payment will be made with RCOC Hrs. or Total \$ Amount.

STEP THREE:

Fill out participant and contact information at the bottom of the page

STEP FOUR:

Payment Required to Reserve Space:

Checks and money orders payable to "YMCA of Orange County"

Credit Card – Fill out the credit card authorization form

Cash – hand deliver on day of event.

STEP FIVE:

Mail registration form & payment to: Attn: New Horizons , YMCA of Orange County-New Horizons Program, 13821 Newport Ave. Suite 200, Tustin, CA 92780 or FAX- 714-508-7607 or Scan + Email newhorizons@ymcaoc.org

Date	Event Name	Meet @ Event Registration Option	Regional Center Hours	Cost of Event
Sept 3	Social Club Outing		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 4	Bowling League	<input type="checkbox"/> 3 RCOC hours or \$66 Meet @ Fountain Bowl 4p-7p	<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 5	Cooking Class: Mini BBQ and Ice Cream Bread		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 6	Limited Space: Boomers Batting Cages and Go Karts		<input type="checkbox"/> 5 RCOC Hours	<input type="checkbox"/> \$110
Sept 7	Limited Space: Oak Glenn Apple Picking		<input type="checkbox"/> 11 RCOC Hours	<input type="checkbox"/> \$242
Sept 11	Craft Class: Make your own Fall Wreath		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 12	Pump it Up		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 13	Limited Space: Dinner at TGI Friday's		<input type="checkbox"/> 5 RCOC Hours	<input type="checkbox"/> \$110
Sept 14	Limited Space: El Capitan Theater: The Nightmare Before Christmas in 4D		<input type="checkbox"/> 9 RCOC Hours	<input type="checkbox"/> \$198
Sept 17	Social Club		<input type="checkbox"/> 3 RCOC Hours	<input type="checkbox"/> \$66
Sept 18	Bowling League	<input type="checkbox"/> 3 RCOC hours or \$66 Meet @ Fountain Bowl 4p-7p	<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 19	Downtown Disney for Crazy Shake at Black tap		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 20-22	Limited Space: Universal Studios Weekender		<input type="checkbox"/> 48 RCOC Hours	<input type="checkbox"/> \$1,056
Sept 20	Edison Dance 60's and 70's Night		<input type="checkbox"/> 5 RCOC Hours	<input type="checkbox"/> \$110
Sept 25	Dave and Busters	<input type="checkbox"/> 3 RCOC hours or \$66 Meet @ Irvine Spectrum 5:30p-8:30p	<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 26	Bowl-A-Rama at Saddleback Lanes		<input type="checkbox"/> 4 RCOC Hours	<input type="checkbox"/> \$88
Sept 27	Limited Space: Anaheim Angels vs Astros		<input type="checkbox"/> 5 RCOC Hours	<input type="checkbox"/> \$110
Sept 28	Limited Space: James and the Giant Peach Musical Play		<input type="checkbox"/> 8 RCOC Hours	<input type="checkbox"/> \$176
	TOTALS:	HOURS _____ OR AMOUNT \$ _____	TOTAL HOURS _____	TOTAL AMOUNT \$ _____

IMPORTANT:

- There is a **maximum of 30%** Financial Assistance for Any Overnight Trip.
- **Payments must be made in full for all events. A credit card, check, or cash must be submitted with Events Registration Form in order to reserve space.**
- **No Show/Late Cancellation** charges are applicable to all registrations.
- **Participants are asked to sign-up at least 24 hours in advance** – Events will close once max capacity is met – confirm your space prior to arrival
- Reserve Early for Limited Space Activities to Guarantee a Space! **Walk-ins will not be accepted! Cancellation fee for cost of ticket is required unless a minimum 72 hr. notice is provided.**
- **Parents/Caregivers are required to confirm member's attendance for events**- confirmation can be made by either phone (714) 508-7635 or email newhorizons@ymcaoc.org. Failure to confirm attendance may forfeit member's reserved space and/or cancellation fees may apply for cost of admission ticket.

Participant Name:	Participant Phone Number:	Email Address:
Caregiver Name:	Caregiver Phone Number:	Caregiver Email Address:

Credit Card Authorization Statement:

I (we) hereby authorize the YMCA of Orange County to initiate debits from my Card Account listed below:

CREDIT CARD # _____ EXPIRATION DATE: _____/_____/_____

CARD HOLDER NAME (Please Print): _____

TYPE OF CARD: _____ ISSUER: _____

ACCOUNT HOLDER SIGNATURE: _____ DATE _____