

2024 OTYC Youth Camp



***Held rain or shine!
Ages 6 - 14***

For generations, the Omena Traverse Yacht Club on Omena Bay has served the community with a half-day youth program in sailing and tennis. Today, the tradition continues – for OTYC members and non-members alike – creating memories that last a lifetime. This is a wonderful opportunity to have new experiences, make new friends and enjoy one of the most special places on earth – our own Omena Bay! Space is limited, so reserve your spot soon.

CAMP DATES: please indicate/check which week(s) your child will attend:

- July 1-5 (no camp July 4th)
- July 8-12
- July 15-19
- July 22-26
- July 29-Aug 2

CAMP TIME: 10:00am-1:00pm

COST:

Members (must be camper's parents/guardian, not grandparents)	\$150 per week / per child
Non-Members (including member's grandchildren)	\$170 per week / per child
Drop-In (all)	\$40 per day

Drop-ins are welcomed. If your plans change, we will accommodate camp date changes, pending availability.

CAMPER INFO: Check interested weeks above and complete camper info below:



child's name(s) _____
parent/guardian name(s) _____
parent/guardian cell # _____
parent/guardian email _____

CAMPERS MUST COME TO CAMP WITH A PROPER FITTING LIFE JACKET & TENNIS RAQUET

PAYMENT: Make check payable to "OTYC" and mail (or deliver) to:

Susan Krusel
P.O. Box 276
Omena, MI 49674

QUESTIONS: Contact Susan Krusel at omena4076@gmail.com or 231-386-2600.

See you this summer on the Bay!
Susan Krusel, OTYC Youth Camp Registrar

OTYC YOUTH CAMP

CAMPER RELEASE / HEALTH FORM

I hereby agree to all of the following:

- I release the Omena-Traverse Yacht Club (OTYC) from all liability resulting from any injury or accident to my child/children, _____, or I as a consequence of my child or I attending any function sponsored by the OTYC Youth Program. This includes participation in the tennis and sailing program or any additional activities of the Youth Program.
- I release the OTYC, its officers and directors, the sailing and tennis instructors and counselors, and the parent coordinators from any and all liability.
- My child has my permission to attend any of the OTYC Youth Program activities and outings.
- I further understand that if my child behaves in an inappropriate manner and does not follow the rules set by the instructors, my child may be expelled from the Youth Program.

ACKNOWLEDGMENT: By signing, you acknowledge and agree to the above.

Parent/Guardian Signature: _____

Date: _____

Child/children name(s): _____

Birthdate(s): _____

Local address: _____

Local phone: _____

MEDICAL/ALLERGY INFO: Please list any medical conditions or allergies your child has:

Not applicable

EMERGENCY CONTACTS: (In the event the parent/guardian is not reachable)

Name: _____ Phone: _____

Name: _____ Phone: _____

PHOTO USE: Select camp photos may be used in OTYC club member newsletter, bulletin and/or social pages (no child names are ever identified on social media). If you prefer your child be excluded, indicate below.

_____ I do not give permission for my child's photo to be used in OTYC Youth Camp marketing or social media.