



PROGRAM APPLICATION 2009-2010 SCHOOL YEAR

mail to: Camp Y-Koda, W3340 Sunset Road, Sheboygan Falls, WI
53085, Attention: Kayla Post
Email to campykoda@sheboygancountyymca.org or
Fax to (920) 467-7240

Name of Program Requested: _____

School Name: _____

Address: _____

City: _____ Zip: _____ State: _____

School District: _____

Teacher's Name: _____

Teacher's Email Address: _____

Grade: _____ Number of Students: _____

Date Preference for Program:

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Special Circumstances/Accommodations for Students:

Lunch: (Outdoor Education, Ropes Courses and Outdoor Adventure ONLY)

Bag Lunch (45 minutes for lunch) Cookout Lunch (provided by school, 1.25 hours for lunch)

<i>Outdoor Education (Grade 1-3) Circle 4 Archery Survival Skills Frogs Nature Detectives Water Explorations Boating</i>	<i>Outdoor Adventure (Grade 4-8) Circle 4 Archery Outdoor Survival Canoeing/Kayaking BB Gun Team Building Climbing Wall Compass Course Geocaching</i>	<i>Winter Ecology Circle 4 Winter Survival Challenge Survival of the Fittest Snow shoeing Winter Adaptations Life Beneath the Ice Winter Severity Snow Hockey</i>
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OFFICE USE ONLY

Confirmation Letter Sent Staff
 Schedule Calendar
 Invoice