

SILVER BAY YMCA

87 Silver Bay Road • Silver Bay, NY 12874
518-543-8833

<i>For office use only:</i>	
Received	
Open Pathways %	
Maestro	
Raiser's Edge	
Badges	

2020 Guest Form

Guest Information – Please fill in the blanks and make corrections to the below information.

Title	First Name	Nickname (optional)*	Middle Name	Last Name	Suffix	Maiden Name (if applicable)	Birth Date	Gender
Permanent Address				Summer Address(if applicable)				
Street/PO Box: _____				Street/PO Box: _____				
City: _____				City: _____				
State: _____		Zip Code: _____			State: _____		Zip Code: _____	
Home Phone: _____				Phone: _____				
Work Phone: _____				Dates from: _____ to _____				
Cell Phone: _____				Do you prefer to receive mail at this address?				
Email Address: _____				<input type="checkbox"/> Yes <input type="checkbox"/> No				

Two Person and Family Guest Passes include married couples or up to two adults, all dependent children through the age of 18 and full-time college students through the age of 24, residing in the same household. (Proof of residency or college proof may be required.) Please list below the individuals to be included on your 2020 Guest Pass.

Title	First Name	Nickname (optional)*	Middle Name	Last Name	Suffix	Maiden Name (if applicable)	Relationship	Birth Date	Gender

Check here if you would not like to receive the Silver Bay YMCA e-newsletter. *Nickname will be used on badges.

Please review the statements below:

Part A: I agree to hold Silver Bay YMCA harmless for injuries and accidents that may occur during my time at Silver Bay YMCA. If I am a parent or guardian, I accept full responsibility for supervising my children at all times, unless they are registered in a Silver Bay YMCA program.

Part B: I understand guests may be photographed for publicity purposes, if you or any other person on your guest pass wishes not to be photographed, a **Do Not Photograph** request must be submitted, in writing, prior to visiting the campus or participation in any Silver Bay program or activity.

Part C: I understand that Silver Bay YMCA has a restricted alcohol policy and I agree to abide by it. I understand that the policy states a ZERO TOLERANCE concerning the Alcohol Policy. If this policy is violated by any guest, Silver Bay reserves the right to dismiss or cause to be removed, any individual from the grounds without any reimbursement or compensation and with or without warning.

I have read and understand both Part A, Part B & Part C

Signature _____ Date _____

2020 GUEST RATES

REGISTERED GUESTS

Program Pass fees are included for all registered guest staying onsite in one of Silver Bay's accommodations.

PROGRAM PASS	CHILD 0 TO 17	ADULT	TWO PERSON	FAMILY
Annual (Jan. 1 - Dec. 31) Complimentary Day Passes for Annual Program Pass Holders	\$332	\$660	\$980	\$1160
	5	5	10	15
60-Day	\$256	\$512	\$772	\$900
30-Day	\$168	\$332	\$496	\$580
7-Day	\$72	\$144	\$220	\$260

Program Pass Benefits include: Access to all program and activities. See the Breeze for operating hours.

The above rates are 20% of the published 2020 rates, due to a reduction in operating hours and program offerings this summer.

PROGRAM PASS	INDIVIDUAL	FAMILY
Annual	\$60	\$120

Friends of Silver Bay Pass Benefits include: Access to campus including Hiking Trails.

Please Note: Guest Fees do not constitute a charitable gift.

Type of Guest Pass	Dates (10-Day Flex TBD)			# of Days or Weeks	Fee	Total Cost
		to				

Form of Payment: Make Checks Payable to Silver Bay YMCA

Check # _____ Credit Card Exp. Date: _____
 Credit Card No.: _____ 3 Digit Security Code: _____
 Print Name on _____ Signature _____
 Card: _____ : _____

Please return form to: Program Department | Silver Bay YMCA | 87 Silver Bay Rd | Silver Bay, NY 12874

FOR SECURITY REASONS PLEASE DO NOT SUBMIT CREDIT CARD INFORMATION OVER EMAIL.