



# ENROLLMENT PACKET

## 2021 SUMMER CAMP

### At the Y...I Can!



**YMCA Childcare Programs offer:**

**A safe, productive environment**

**Swimming**

**Lunch and snacks**

**Arts and Crafts**

**Character Development**

**Convenient Hours**

**Scholarship opportunities**

**Caring, experienced staff**

**Age-appropriate activities**

**Physical and Education activities**



*We are licensed by the State of Kansas, we are proud to be a United Way Agency and in partnership with JC Penney's and accepts SRS, TFI Family Services and St. Francis contracts.*

**The following packet outlines the details for Summer Camp. For more information, please contact the Summer Camp Coordinator, Valerie Terrazas 620-275-1199 or [vterrazas@ymcaswkansas.org](mailto:vterrazas@ymcaswkansas.org)**



# Childcare Information

## Child/Program Information

*To help us better serve your child we would like to make sure that your child is picked up and dropped off in a timely manner. Please give us any details that will help us in providing the best daily routine possible.*

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Current Grade Level \_\_\_\_\_

### Early Bird Registration - April 1-May 15

#### Early Bird Special Prices

Equipment Fee: \$30 one-time

EFT Payments: \$90/week

### Regular Registration

#### May 15-End of Summer Prices

Equipment Fee: \$40 one-time

EFT Payments: \$120/week

ALL rates listed are for members, program participant rates are double.

You are required to pay for the entire summer to hold your child's spot, even if child does not attend. You must pay the first week and equipment fee to enroll as well as have a ZERO balance on your account.

**Scholarships are available!**

Will your child need a Y lunch for the weeks they are here? (Circle one)      Yes      No

Child's T-shirt Size (circle one):    Youth S (6-8)      Youth M (10-12)      Youth L (14-16)

Adult S      Adult M      Adult L      Adult XL

Is there anything else we need to know about your child's daily schedule?

\_\_\_\_\_  
\_\_\_\_\_

Parent Email: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Cell Provider: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# YMCA Childcare Authorization and Agreement

Please read the following statements, initial by each one, and sign and date at the bottom.

1. \_\_\_\_ My child has my permission to use all of the **play equipment and participate in all of the activities** while attending and participating in any YMCA program.
2. \_\_\_\_ My child has my permission to swim in the Garden City Family YMCA's swimming pool during child care program activities.
3. \_\_\_\_ Payments for child care will be made in a timely manner. **I understand that if payments are not paid on time, my child will lose his/her spot in the program and my balance due will be sent to collections.**
4. \_\_\_\_ I understand weekly payments will be automatically drafted from a checking/savings or credit card account.
5. \_\_\_\_ All enrollment procedures will be completed before my child may enter the program.
6. \_\_\_\_ I understand if my child is fevered, sick or throwing up that they may not attend the program for 48 hours. In addition, if they develop a fever, get sick or throw up while attending, they **MUST** go home and cannot return for 48 hours.
7. \_\_\_\_ I understand that there are inherent risks in participating in any activity and I will not hold the Garden City Family YMCA responsible for any accident or injury that may occur during program hours.
8. \_\_\_\_ YMCA Summer Camp hours are **6:15a.m.-6:15p.m.**
9. \_\_\_\_ I understand that a late fee will be applied to my account if I am late picking up my child. Each late fee will be \$10 for every five minutes I am late.
10. \_\_\_\_ I understand that I need to have my child at the YMCA **30 minutes before leaving for a field trip.** I understand that no one will be left at the YMCA to watch children who arrive late.
11. \_\_\_\_ I give my permission for my child to ride in the Garden City Family YMCA vehicles to and from the YMCA and for all field trips.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Child Information

Does your child have any specific food or medicine allergies that we need to be aware of?  
Please explain. \_\_\_\_\_

Does your child have any specific fears, problems, or dislikes that we need to be aware of?  
Please explain. \_\_\_\_\_

Does your child have any chronic or special needs that we need to be aware of or monitor?  
Please explain. \_\_\_\_\_

Does your child require any daily medications? Please explain and state time and days  
medication is needed. You will also need to fill out a Medication Authorization Form.

How would you rate your child's ability to swim? Has he/she participated in progressive  
swim lessons? \_\_\_\_\_

Please list any and all other services provided within the community for your child?  
(Example: TFI Family Services, Inc., St. Francis, Area Mental Health, Boy Scouts, Girl Scouts,  
Salvation Army, Big Brothers/Big Sisters, etc.)

Names of individuals specifically <u>UNAUTHORIZED</u> to visit or pick up children:			
Name	Relation	Restraining Order:	Yes No
Name	Relation	Restraining Order:	Yes No
Name	Relation	Restraining Order:	Yes No
Name	Relation	Restraining Order:	Yes No

## **BANK DRAFT & CREDIT CARD DRAFT POLICY**

1. I authorize the Garden City Family YMCA to withdraw my child care dues from the account provided below each week or monthly.
2. In order to cancel my child care, I need to fill out the YMCA's cancellation form two weeks prior to the date of draft. If not, I understand my child care dues will be drafted from my account once more before being cancelled\_\_\_\_. (Initial here)
3. To make any account changes towards child care dues, I understand that I must notify the Family Director or Childcare Coordinator at least two weeks prior to my next draft date.
4. The Garden City Family YMCA charges \$30 service fee on all insufficient drafts. If my draft is returned unpaid, the YMCA will automatically redraft it and the \$30 service charge as many times as deemed necessary until all monies are collected. If my draft is returned two consecutive times and the first draft has yet to be collected, your child will no longer be allowed to attend YMCA child care program. If my child care draft is denied because of a stop payment or a closed account, the YMCA may cancel my child care, but I will still owe the dues plus \$30 service charge.
5. Child care rates are based on the programs that you are enrolled in. We do not prorate if your child does not attend. Child care rates are based on the membership type and the school that the child attends. If your enrollment type changes for any reason, you will be notified via telephone or e-mail and your draft amount will automatically be adjusted to the appropriate child care rate
6. Bank drafts and credit card drafts can be deducted from an account in the following ways : (please circle)
  - One Time Payment on \_\_\_\_\_
  - Monthly Payments on Day \_\_\_\_\_
  - Weekly Payments on M TU W TH FRI (circle one)
  - Semimonthly Payments on Day \_\_\_\_\_ & \_\_\_\_\_
7. Garden City Family YMCA reserves the right to cancel child care services at any time for any behavior that goes against the YMCA mission. Our MISSION is: **To put Christian principles into practice through programs that build healthy spirit, mind and body for all.**
8. The YMCA does not give cash refunds. All refund requests must go through Family Committee and all decisions made by the Family Committee are final.

**\*By signing below you are giving the Garden City Family YMCA authorization to draft your monthly child care dues directly from your bank or credit card account, in accordance to the terms and conditions listed above.**

Date: \_\_\_\_\_ Name of Financial Institution: \_\_\_\_\_

Account# or Credit Card #: \_\_\_\_\_ Checking    Savings    Credit Card

Routing # or Expiration Date: \_\_\_\_\_

Account Holder's name (Please Print): \_\_\_\_\_

Account Holder's signature: \_\_\_\_\_

### *Office Use Only*

Child Care Service: \_\_\_\_\_ Rate according to time of draft: \_\_\_\_\_