

School Attends:

 Before Care

 After Care

Date Enrolled: _____

Date Withdrawn: _____

Allergies: YES NO

Special Care Plan Required:
 YES NO

Waterbury YMCA
136 West Main Street
Waterbury, CT 06702

Child Enrollment Form

Child's Name: _____ Gender: _____ Date of Birth: _____

Address: _____ Home Phone: _____

Mother's Name: _____ Home Phone/Pager: _____

Mother's Address: (if different) _____

Mother's Employer: _____ Work Phone: _____

Father's Name: _____ Home Phone/Pager: _____

Father's Address: (if different) _____

Father's Employer: _____ Work Phone: _____

Physician's Name: _____ **Telephone:** _____

3 Persons to call in case of emergency & to whom my child may be released to: (*other than parents*)

1. Name: _____ Telephone: _____

Address: _____ Relationship to Child: _____

2. Name: _____ Telephone: _____

Address: _____ Relationship to Child: _____

3. Name: _____ Telephone: _____

Address: _____ Relationship to Child: _____

Signature of Parent or Guardian: _____ Date: _____

Emergency Information Form

The Waterbury YMCA takes the safety and well-being of your child very seriously. It is important that this information is filled out completely.

Child's Name: _____ Date of Birth: _____ Age: _____

Address: _____ City: _____ Zip: _____ Phone: _____

Mother's Name: _____ Daytime Phone: _____ Evening Phone: _____

Father's Name: _____ Daytime Phone: _____ Evening Phone: _____

3 Persons to call in case of emergency & to whom my child may be released to: *(other than parents)*

Your child will not be released to anyone not on the pick-up list, unless authorized in writing prior to pick-up date.

1. Name: _____ Telephone: _____ Relationship: _____

2. Name: _____ Telephone: _____ Relationship: _____

3. Name: _____ Telephone: _____ Relationship: _____

Emergency Hospital Preference: _____ **Physician:** _____ **Phone:** _____

Insurance Carrier and Member ID #: _____

List Child's Medications: _____ **Allergies:** _____ **Date of last Tetanus:** _____

Permission Authorizations

In the following statements of permission, the phrase "my child" refers to the child named above.

Medical Emergencies Permission

If an emergency need should arise, I hereby give my permission for the staff trained in first aid to administer it, or to obtain care for my child from a licensed physician or dentist. I also give my permission for my child to be taken to a hospital or other medical facility by the police or ambulance. If I cannot be contacted, I authorize the administration of the Waterbury YMCA to act on my behalf relative to emergency medical treatment for my child.

Signature of Parent or Guardian: _____ Date: _____

Field Trip/Gym/Swim/Outdoor Activity Permission

I hereby give permission for my child to participate in normal program activities in and away from the childcare center, and release the Waterbury YMCA and it's staff from all responsibility for injury or damage resulting from such activities to the extent that they might exceed any coverage which the YMCA may have, except injury or damage resulting from gross negligence or willful misconduct.

Signature of Parent or Guardian: _____ Date: _____

Publicity Permission

I hereby give permission to the Waterbury YMCA to take pictures of my child participating in the activities of the YMCA, and such pictures may be used for instructional or promotional purposes. I also give permission for the YMCA to use the artwork of my child for display or promotional purposes

Signature of Parent or Guardian: _____ Date: _____

Discipline Policy Agreement

By signing, I agree that I understand the discipline policy of the Greater Waterbury YMCA and it has been reviewed both verbally and in writing.

Signature of Parent or Guardian: _____ Date: _____

The undersigned voluntarily agrees to hold the YMCA harmless for injuries or accidents resulting in bodily injury or property damage during my child's participation in programs at YMCA. I further waive, release, absolve, and indemnify the Greater Waterbury YMCA, its Directors, Volunteers, Officers or employees for injuries or accidents occurring while participating in the programs of YMCA.

Signature of Parent or Guardian: _____ Date: _____

Receipt of Policy Handbook

I acknowledge receipt of the Waterbury YMCA Childcare Policy Handbook. I realize that it is my responsibility to read, understand and comply with its contents.

Signature of Parent or Guardian: _____ Date: _____

Print full name: _____

Enrollment Checklist

(For YMCA staff only)

Child's Name: _____ Date: _____

Forms	Complete	Comments
Registration Form		
Child Enrollment Form		
Emergency Info/Permission Authorizations		
Health Record		
Nutrition		
Contractual Agreement		
Allergies		
Transportation Authorization		
Photo Permission		
Swim/Field Trip		
Birth Certificate/Social Security		
Insurance/Medical Card		
Proof of Income		
Guardianship/Court Order		
CCAP/YMCA Financing		

Staff Signature: _____ Date: _____

WATERBURY YMCA CHILD CARE CONTRACTUAL AGREEMENT

TUITION AGREEMENT

I am enrolling my child _____ in the Before and/or After School program(s) provided by The Greater Waterbury YMCA. I agree to pay \$_____, on the 1st and 15th of each month. The registration fee included the 1st week payment and a deposit, which will be posted to the last week. PAYMENTS ARE DUE ONE WEEK IN ADVANCE. As long as the program is open I am responsible for that payment, even though my child may not be present. If payment is not received by Tuesday of the week of care, I will pay a \$10.00 late fee.

The YMCA Child Care Center's hours are school's dismissal to 5:30 p.m. The YMCA off-site program hours vary by site and are located on the cover of this enrollment packet. There is a per child LATE PICK UP FEE of \$10.00 for every 15 minutes or part thereof if a child is left in the facility beyond the above hours. *

I agree to apply for the Care4Kids child care subsidy program. If I qualify, I agree to pay my family portion, as determined. I agree to authorize Care4Kids to pay the Waterbury YMCA directly. I will notify The Waterbury YMCA Child Care Program of any changes to my qualifications. I understand that I am responsible for the child care fees if Care4Kids terminates payments.

The Greater Waterbury YMCA Child Care Center and off-site programs reserve the right to withdraw a child if warranted, as indicated in the Parent Handbook. In turn, a parent has the right to withdrawal their child in writing with at least two weeks notice or the parent will be charged for those weeks.

I have read the policies and procedures of the YMCA Child Care Center and off- site programs which include but are not limited to tuition, late fees, absenteeism, holidays, vacations, center closings, special events and termination and I understand these regulations and agree to comply.

Parent Signature: _____ Date: _____

***ABANDONED CHILDREN STATEMENT:** The State of Connecticut has an "Abandoned Child Policy" If a child is not picked up within 1 hour of the center's closing, and all efforts have been made to contact the parents and emergency contact people, providers are to assume the child has been abandoned. Providers must contact DCF and the police to have the child picked up and brought to the local Department of Children and Families. The Center's staff are mandated reporters for child abuse and neglect.

Waterbury YMCA Before & After School Child Care Fees

2011-2012

Before School

Member

Mon-Fri \$91/bi-monthly

M/W/F \$59/bi-monthly

T/R \$40/bi-monthly

Non-Member

Mon-Fri \$103/bi-monthly

M/W/F \$73/bi-monthly

T/R \$53/bi-monthly

After School

Member

Mon-Fri \$125/bi-monthly

M/W/F \$86/bi-monthly

T/R \$57/bi-monthly

Non-Member

Mon-Fri \$137/bi-monthly

M/W/F \$99/bi-monthly

T/R \$70/bi-monthly

Student Name _____

Please register my child for:

AM Session: Monday-Friday

Mon/Wed/Fri

Tues/Thurs

PM Session: Monday-Friday

Mon/Wed/Fri

Tues/Thurs

Fees are payable on a prepaid 1st and 15th of the month basis. The yearly tuition is based on 180 days of school regardless of school closings or absences. The YMCA does participate in the Care4Kids program. Parents are responsible to make all bi-weekly payments until a certificate is issued from Care4Kids and a parent share fee has been determined.

*Schedules outside of the above options may be considered on a per case basis at the discretion of YMCA Management.

IMPORTANT POLICIES TO REMEMBER

- **ALL** After School Programs **DO NOT** run when school is cancelled due to inclement weather.
- **ALL** Before School Programs **DO** run on a delayed schedule if there is a delayed opening due to inclement weather, i.e. if there is a 90 minute delay the program will begin on a 90 minute delay.
- **ALL** After School Programs are **CANCELLED** when PM Activities are cancelled or when school is dismissed early due to inclement weather. It is your responsibility to provide the school office with information pertaining to how your child will be dismissed from school in these instances.
- **ALL** After School Programs **DO** run when there is a scheduled half day. For example, the day before Thanksgiving or Christmas Eve and when teachers have in service trainings or open house, etc.
- A **TWO WEEK** notice is required for your child to be disenrolled from the program. Therefore, you are responsible for payments during this time period. Notice must be given to the off site childcare director via written notice or phone call.
- If your child is absent from the program due to a vacation or illness, you are still responsible for payment during that week, unless other arrangements have been made with the off site childcare director.

Waterbury YMCA School Age Program Weather Related Early Dismissal Plan

When school is dismissed early as a result of inclement weather, the Waterbury YMCA does NOT offer Aftercare. In order to ensure that the children are safe, please indicate the provisions established for your child once he or she is dismissed from school.

Child(ren)'s Name: _____

Home Address: _____ Phone: _____

_____ My child is to be picked up at school by his/her parent.

_____ My child is to take his/her bus home. He/she rides on bus number

_____ My child is a "walker" and will be walking home from school. Once he/she is home, someone will be there for him/her.

_____ My child is to go to a friend/relative's house.

He/she is to _____.

(Take a bus (indicate bus number), walk, or be picked up at school)

He/she will be in the care of _____.

(Name and phone number of caretaker)

My child(ren)'s arrangements are not described above. He/she is to:

_____.

In addition to the procedures listed above, please include pertinent emergency telephone numbers in case the school or the Waterbury YMCA School Age Program needs to reach you for any reason.

Mother's Contact Information

Place of Employment _____

Work Phone Number _____ Cell Phone Number _____

Father's Contact Information

Place of Employment _____

Work Phone Number _____ Cell Phone Number _____

Emergency Numbers

Contact's Name _____ Phone Number _____

Contact's Name _____ Phone Number _____

Contact's Name _____ Phone Number _____