



2007-2008 School Year

Costs Per Month:

\$170 YMCA Members
\$200 Non-Members

Name School Grade

Address City, State Phone#

Child's Birthdate Sex Family E-Mail

Father's Name Phone(H) (W)

Mother's Name Phone(H) (W)

Emergency Contacts:

Name Phone(H) (W)

Name Phone(H) (W)

Special Health Needs

Please list anyone authorized to pick up your child

YMCA Discipline Policy

Levels 1 and 2

- Change of activity Letter home stating the incident and action taken
Verbal warning Parent Conference (depending on incident)
Time-Out A loss of priviledges

Levels 3 and 4

- Letter home stating the incident and action taken
Parent conference (depending)
A temporary loss of priviledges
Possible suspension (1-5 days)

EXPULSION from the program could be justified action for fighting or stealing!

- 1. I certify that my child is in good mental and physical health and able to participate in the Afterschool Program.
2. I will not hold the YMCA responsible for injuries or illnesses my child may experience during the course of the activities.
3. In the event that I cannot be reached, I hereby give permission for the physician selected by the YMCA staff to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child.
4. I am fully aware of the YMCA discipline policy if my child should need it.
5. I hereby give the YMCA permission to administer Tylenol or aspirin if my child should need it.
6. I authorize the YMCA to take pictures of my child for promotional purposes only. I understand the photos will not be accompanied by my child's name.

Parent/Guardian Signature

Date