

2009-2010



# Prime Time Y

**In Collaboration with the Enterprise School District  
at BOULDER CREEK SCHOOL  
Enrollment Packet**

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parents Name \_\_\_\_\_ Start Date \_\_\_\_\_ School \_\_\_\_\_

We welcome you and your child to YMCA Prime Time at Boulder Creek. Afterschool Child Care services are available to children grades K through 7 who attend Boulder Creek Elementary School. We also offer child care on most holidays and Teacher Inservice Days (SIP) from 7:30 am to 6:00pm. These full & half days are offered based on enrollment. Locations of Non-School Days may vary.

**There is a \$20.00 non-refundable Registration Fee for new participants. To secure your child's enrollment, attach the Registration Fee and payment for your first week** to the completed packet and return to Boulder Creek YMCA Child Care or Shasta Family YMCA, 1155 Court St. Redding, 96001.

**PLEASE NOTE: The YMCA cannot enroll your child the same day your registration is received.**

For detailed information on our program, policies and fees, refer to the Parent Handbook.

**PROGRAM/DAYS REQUESTING(First week of care only)**

**Please circle the program, days attending and price paying for the first week of care. Future weeks will be scheduled using a YMCA Afterschool Scheduling Card provided at your site.**

<u>PROGRAM</u>	<u>DAYS NEEDED FOR 1<sup>ST</sup> WEEK</u>	<u>PRICE</u>
<u>SEGMENT I</u> 11:20-2:15 (AM Kindergarten)	M T W TH F	\$45.00 per week
<u>SEGMENT II</u> 2:15-6:00 (PM Kindergarten)	M T W TH F	\$35.00 per week (Grant Collaboration)
<u>SEGMENT I &amp; II</u> 11:20-6:00 (AM Kindergarten)	M T W TH F	\$80.00 per week (Grant Collaboration 2:15-6:00)
<u>AFTER SCHOOL</u> 1:50-6:00 (PM K-7 grade)	M T W TH F	\$35.00 per week (Grant Collaboration)

plus \$20 registration fee

\* TIMES AND PRICES ARE SUBJECT TO CHANGE DUE TO SCHOOL SCHEDULE CHANGES

# Prime Time Y

## Current Participant Enrollment Form

Child's Name \_\_\_\_\_ M/F \_\_\_\_\_ School \_\_\_\_\_ Teacher \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade \_\_\_\_\_

Family Email Address \_\_\_\_\_ Ethnicity(Optional) \_\_\_\_\_

Contact first? Home Cell Work  
Mother's Name \_\_\_\_\_ Phone # \_\_\_\_\_ Phone # \_\_\_\_\_ Phone# \_\_\_\_\_

Mother's Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Contact first? Home Cell Work  
Father's Name \_\_\_\_\_ Phone # \_\_\_\_\_ Phone # \_\_\_\_\_ Phone# \_\_\_\_\_

Father's Home Address \_\_\_\_\_ Zip \_\_\_\_\_

### **ADDITIONAL EMERGENCY CONTACTS – Also authorized to pick up child (MUST BE 18)**

1. Name \_\_\_\_\_ Phone # \_\_\_\_\_

2. Name \_\_\_\_\_ Phone # \_\_\_\_\_

3. Name \_\_\_\_\_ Phone # \_\_\_\_\_

Call Emergency Hospital  Other Explain: \_\_\_\_\_

### **ADDITIONAL NAMES OF PERSONS AUTHORIZED TO TAKE CHILD FROM THE FACILITY (MUST BE 18)**

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

3. Name \_\_\_\_\_ Relationship \_\_\_\_\_

4. Name \_\_\_\_\_ Relationship \_\_\_\_\_

5. Name \_\_\_\_\_ Relationship \_\_\_\_\_

See custody or legal documents on file.

Signature of Parent or Authorized Representative:

\_\_\_\_\_ Date \_\_\_\_\_

Staff only:

Return Date \_\_\_\_\_ Date Left \_\_\_\_\_





## Permission to release child to School Day Staff

My child may be released from the YMCA to School Day Staff on campus during YMCA time.

My child may not be released from the YMCA to School Day Staff, and needs to remain in the Afterschool program during YMCA time, unless written permission is on file.

## Permission to Share Information Form

In order to provide the best possible care for your child, please complete the following:

I, \_\_\_\_\_ (parent) authorize the Shasta Family YMCA Child Care Site Director to seek and/or share important information from/with the appropriate School District personnel which is pertinent to the well being of my child, \_\_\_\_\_ (child name) during his/her time spent in the YMCA after school program at \_\_\_\_\_ (school). The information discussed will be kept confidential and may include but is not limited to:

- Homework
- Discipline
- Health Issues
- Child's Welfare
- I.E.P. (Individual Education Plan) Information

\_\_\_\_\_  
Child Name

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

# Prime Time Y



## After School Program Site Early Release Policy

Every after school program must operate for a minimum of three hours a day and at least until 6:00 p.m. on every regular school day. It is the intent of the Legislature that students participate in the full after school program except when released early in accordance with an early release policy established by each local program.

The Prime Time Y at Boulder Creek After School Program allows for the early release of students from the program under the following circumstances:

- Medical Appointments
- Parent or Guardian Pick Up
- Special Campus Events Under the Direction of the Principal
- School Site Closure Due to Weather

I understand that the intent of the Prime Time Y After School Program is to keep my child safe and engaged in meaningful activities after school each day until 6:00 P.M. I also understand that the policy of the program is to release my child from one safe environment (at the program site) into another equally safe environment (the custody of a parent or guardian). And, if I pick up my child before 4:45pm I will circle the reason for the early release on my child's sign in and sign out sheet.

I have received, and have read, understood and agree to comply with the Prime Time Y after School Program **"Early Release Policy"**.

Name of Parent: \_\_\_\_\_

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

Name of Student: \_\_\_\_\_

Date: \_\_\_\_\_

School Site: \_\_\_\_\_

- 1) Parents are responsible for informing the Site Director and the Y office of any changes in their child's attendance schedule, address, phone, work, or emergency telephone numbers, etc.
- 2) Schedule/Payment Cards must be filled out correctly and completely with the child's name and days of planned attendance clearly marked according to the instructions on the card (**X's for care, O's for no care**). **When a Schedule/Payment Card is not submitted by payment night, your child will be scheduled and charged for 5 days. Once charges have been posted to your account for the upcoming week they will not be removed.**
- 3) Please use the **Schedule Change form** to notify the Y staff of any changes to upcoming schedules.
- 4) There is a weekly charge each week. You may choose a varying schedule, Monday through Friday. Without a written doctor's note, weekly charges will remain the same regardless of absences, illness, vacations, etc. **The Y Child Care Office must be notified before the end of each week your child is absent due to custody reasons.**
- 5) We require prior notification if your child is to be absent for any reason. Two weeks notice of withdrawal along with payment for those weeks is required when the child care site is maintaining a waiting list for enrollment.
- 6) Avoid the \$5.00 "Overdue Balance" fee by making payment no later than **Wednesday Night** prior to the upcoming week of care. All child care fees are due in **ADVANCE**, preferably by check or money order made out to Shasta Family YMCA. Fees not paid beyond one week may result in suspension of child care services.
- 7) A \$15.00 "Returned Check" fee will be charged for each check returned from your bank due to non-sufficient funds.
- 8) Each family will receive an Account History Report every month. All account discrepancies must be adjusted within 30 days of receipt when there are any questions regarding charges and /or payments, or we will accept your statement as being correct. **All accounting concerns must be directed to the YMCA Child Care Business Office.**
- 9) We provide a year-end report of all payments made on your account. Our tax ID # is 94-1212141.
- 10) When possible, you will be notified 30 days before fee changes are implemented.
- 11) Children coming directly from school dismissal will be signed in by child care staff and only an authorized adult (must be 18) with identification will be permitted to sign them out upon leaving. On days of full-day care (7:30am - 6:00pm) parents are to walk their children into the classroom to sign them in upon their arrival.
- 12) In the event the YMCA Afterschool programs must be closed due to inclement weather, you will be notified via the radio. If your child's school is closed, so is the after school program.
- 13) The Afterschool programs are closed for the following holidays: New Year's Eve, New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, Christmas Eve, and Christmas Day.
- 14) The center will close promptly at 6:00 p.m. There is a **late pick-up fee** of \$1.00 for every 1 minute you are late picking up your child. In the event we cannot reach you or an authorized person by 8:00pm, the Shasta County Child Protection Agency will be called
- 15) Medications can only be given with specific written instructions from the physician. Directions on the bottle must include dosages, times and dates that medication is to be administered. Children cannot attend if they are ill, you must make alternate arrangements for child care. (See the Health Policy in your Parent Handbook).
- 16) The after school staff will act according to his/her best judgment in any emergency requiring medical care. Parents will be notified immediately and are responsible for the cost of all medical care.
- 17) If deemed necessary for the safety of your child or others, the YMCA staff have permission to restrain and/or physically remove a child from an unsafe situation. Parents will be notified if this circumstance occurred.
- 18) Lunches are not included in the weekly fee. Nutritious snacks are provided daily. Please advise us of any special dietary needs using the forms provided.
- 19) Photographs or likeness or voice of your child may be used in promotional material such as brochures, newspaper, or radio releases without reimbursement for such photographs or promotions.

The Shasta Family YMCA Child Care programs are a non-profit child care center. The operation of our program is overseen by the Shasta Family YMCA Board of Directors. For the names and addresses of current members, please contact the Child Care Director.

**YMCA WAIVER:**

All of the information contained on these forms required by the YMCA, is as accurate as possible. I agree to allow the YMCA to use photos taken of my child for promotional materials. I also agree to abide by the rules of the YMCA in regard to my child being in their program. The YMCA reserves the right to dismiss a child for continual behavioral problems. I understand that the YMCA carries no medical insurance, and I, intending to be legally bound hereby for myself, my heirs, executors, and administrators, waive and release all rights, claims and damages that my son or daughter may incur against the Shasta Family YMCA, and its representatives, successors, and assigns, for any and all injuries suffered by my son or daughter in this program. I also understand that all items brought from home must be clearly labeled with my child's name and that the YMCA is not responsible if these items become lost, stolen, or damaged.

I HAVE RECEIVED MY COPY OF THIS DOCUMENT AND PARENT'S HANDBOOK. MY SIGNATURE ACKNOWLEDGES MY UNDERSTANDING OF AND AGREEMENT TO THE YMCA CHILD CARE POLICIES.

Child Name	Parent or Guardian Signature	Date
Staff Signature	Date	

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