

Emerson Family YMCA Y CLUB 2015-2016 REGISTRATION FORM

Our Philosophy

- To provide quality care for children, regardless of socio/economic background.
- To support and strengthen the family unit.
- To help children develop to their fullest potential.
- To deliver the program in a positive YMCA environment of safety, support and care.

The Emerson Family YMCA Y Club program provides a high quality, safe, convenient, recreational environment for children regardless of ability.

Open communication and collaboration with the school regarding your child's behavior and individual needs will be ongoing.

The Y Club program centers on Enrichment Zones, which provides children with free choice options. Additional Enhancement Activities are also implemented to compliment the school day. The Y believes that children learn through play and structured recreational activities.

Benefits to the YMCA Program

- State licensed for ages K through 5
- Conveniently located at your child's school
- Opens as early as 6:30 AM (Pattonville)/6:45 AM (Ferguson-Florissant, Hazelwood)
- Closes as late as 6 PM
- Convenient 1-3 day or 4-5 day program options
- Trained, caring, professional staff
- Planned, recreational and enhancement activities focusing on fun, learning and the development of a positive self-image.
- Tuition fees can be paid on a monthly or semi-monthly basis. Fees can be drafted from a savings, checking, or credit card for your convenience.

Financial Assistance

Financial assistance toward program fees is available for those with a demonstrated financial need. However, we do ask families to complete the DFS income evaluation process. Families that do not qualify for DFS funding will be considered for YMCA financial assistance. Applications are available at the Emerson Family YMCA. State Child Care Assistance is accepted.

Registration is on a first come, first served basis. *Space is limited, so sign up early!*

Current Enrollees: April 1– April 30, 2015 **New Enrollees:** Begins May 1, 2015 (Current enrollees with Kindergarten siblings will take priority over new enrollees.)

To guarantee that your child may attend our program on the first day of school, you must register **at least one** week prior to that date. There will be a Registration Blackout (NON Registration) period for one full week prior to the 1st day of school. Licensing restrictions may apply. Current enrollees will have priority.

Registration Process

The *non-refundable, non-transferable* registration fee is <u>\$15</u> for one child or <u>\$25</u> per household through July 31, 2015. Effective August 1, 2015, registration fee is \$30 for one child or **\$50** per household.

To hold a space for your child(ren), please complete this registration form and return to the **Emerson Family YMCA** with your registration fee. To comply with state licensing regulations, additional enrollment forms must be completed before students are admitted to the program.

Y Club Sites

| Hazelwood | Pattonville | Ferguson/Florissant | | | |
|------------|---------------------------------------|---|--|--|--|
| Armstrong | Drummond | Combs | | | |
| Arrowpoint | Parkwood | Halls Ferry | | | |
| Barrington | Rose Acres | Walnut Grove | | | |
| Brown | Willowbrook | Wedgewood | | | |
| Cold Water | | | | | |
| Garrett | | | | | |
| Jamestown | | | | | |
| Jana | Inclusion | Inclusion Services Available | | | |
| Jury | | Our YMCA welcomes participation by children of all abilities. The YMCA provides | | | |
| Keeven | | | | | |
| Larimore | | | | | |
| Lawson | | a recreational environment for children and teens with and without disabilities | | | |
| Lusher | | through added support staff, when needed, to facilitate successful participation in the programs, when appropriate. For more information call the Mark Pacatte, Director of Childcare Services at 314.521.1822 ext. 40. | | | |
| McCurdy | | | | | |
| McNair | Director of Childcare Services at 314 | | | | |
| Russell | | | | | |
| Townsend | | YMCA branch staff will contact parents/guardians of children with specialized educational documents. | | | |
| Walker | educational documents. | | | | |
| Membershin | *Must submit a current IEP/BMP/504 S | tudent Accommodation Plan and DHSS Individual | | | |

Plan for Specialized Care with this registration form and complete the Inclusion

information forms before program participation is authorized. Enrollment will NOT be considered final until all required processes have been met and reviewed. Although every

effort is made to provide reasonable accommodations, there may be instances where a

child's needs may exceed the parameters of the scope of our program.

Membership

The best way to enjoy the YMCA is to be a member! Being a YMCA member gives you added discounts to child care cost.

2015-2016 Fees

| Program | # Days Per Week | Y Member Monthly Fee | Non-Member Monthly Fee |
|---------|-----------------|----------------------|------------------------|
| AM | 1-3 | \$84 | \$115 |
| AM | 4-5 | \$135 | \$180 |
| PM | 1-3 | \$96 | \$130 |
| PM | 4-5 | \$160 | \$205 |
| AM/PM | 1-3 | \$132 | \$180 |
| AM/PM | 4-5 | \$220 | \$285 |

- Payments are due on the 1st of the month (for monthly billing) or the 1st and 15th of the month (for semi-monthly billing).
- Fees are based on 9 ½ months of service.
- Payments made after the due date are considered late and a \$5 fee will apply.
- A \$25 fee will be charged to change your child's registered session.
- Winter and Spring break camps are available at the Emerson Family YMCA (additional fees do apply).



2015-2016 School Year Emerson Family Y Club Registration Form <u>Please complete one form per child</u> All forms must be turned into the Emerson Family YMCA located at 3390 Pershall Road Circle one: Pattonville / Ferguson-Florissant / Hazelwood

| School Site | Requested Start Date (this is when charges begin) | | | | | |
|---|---|-----------------------|------------------|------------------------------------|--|--|
| | | Gender M F | | | | |
| Child's Name | | | | | | |
| Address | City | | State | Zip Code | | |
| Date of Birth | | Grade | | | | |
| Parent/Guardian I | | Home Phone | Cell Phone | | | |
| Home Address | | Preferred E-mail Ac | ldress | | | |
| Employed By | | Work Phone | | | | |
| Work Address | | City | State | Zip Code | | |
| Parent/Guardian II | | Home Phone | Cell Phone | | | |
| Home Address | | Preferred E-mail Ac | ldress | | | |
| Employed By | | Work Phone | | | | |
| Work Address | | City | State | Zip Code | | |
| Session: | Day | s Attending: | | | | |
| AM PM AM & PM | M | _ T W Th | F | | | |
| Desired Start Date | Payment Opti | ons Monthl | y Sem | ni-monthly | | |
| Is there a: Chronic /Severe Health Condition | Yes | No | | | | |
| (Asthma, Diabetic, etc.) Custodial Agreement | Yes | No | | | | |
| **Individual Education Plan | Yes | | | | | |
| **Behavioral Management Plan | Yes | | | | | |
| **504 Student Accommodation Plan | Yes | | | | | |
| ** You must submit a current IEP/BMP/504 with th | is registration form | and complete the | Inclusion Inform | ation forms before program | | |
| participation is authorized. Enrollment will NOT be considered final until all required processes have been met. Chronic Health and Custodial Agreements forms must be submitted on the first day of school. | | | | | | |
| | | | | | | |
| THIS FORM CANNOT BE ACCEPTED WITHOUT A P | ARENT OR LEGAL G | UARDIAN SIGNATU | JRE. By signing | this contract, I understand that I | | |
| have registered for the above session/times and ar long as my child is enrolled in the Y Club program. | e therefore respons | sible for payment for | or each week, wh | hether my child attends or not, as | | |
| I must notify the Site Director one week prior to the | | | | | | |
| notification, I understand my child will be dropped | from the program. | certify that all info | ormation provide | ed is complete and correct, to the | | |
| best of my knowledge. I will be held responsible for | | | | | | |
| the Family Handbook through the Emerson Family | • • | | • | | | |
| Parent Signature | Date | e | | | | |
| YMCA USE ONLY | | | | | | |
| YMCA Member # Date Amount Paid | | Non Member # | | | | |
| Date Amount Paid | Receipt # | Initial | | | | |
| | | | | | | |
| | | | | | | |