

Child Development Pre-Registration Summer 2023/After-School 2023- 2024

This form is for children who have NOT participated in Y After-School programs or summer camp programs in the last year.

If your child is currently participating in Y After-School/Camp programs, please click [here](#) to verify/provide updates for medical, parental and emergency contact information for the coming summer/school year.

Please fill out all requested information on this form as completely as possible.

[Click for details about Y Camp 2023 & End of Summer Camp 2023.](#)

[Click for details about After-School Programs for school year 2023-2024.](#)

Child's Full Legal Name:

Does your child use a name different than their legal name? If so, please let us know so we can refer them using that name.

Child's Preferred Pronouns:

☐ She/Her

☐ He/Him

☐ They/Them

☐ Other: _____

What school does your child attend?

(Note: Homeschooled children and children who attend schools outside of LAPS are not eligible for the school year after school programs at LAPS school sites).

- ☐ Aspen Elementary
- ☐ Barranca Elementary
- ☐ Chamisa Elementary
- ☐ Mountain Elementary
- ☐ Pinon Elementary
- ☐ My child is homeschooled
- ☐ Other: _____

My child will be participating in:

(please select all that apply)

- ☐ Y Camp 2023 (6/1 - 7/21)
- ☐ End of Summer Camp 2023 (7/24 - 8/4)
- ☐ After-School 2023-2024

If you are registering your child for After-School 2023-2024, please indicate below what schedule they will be on.

- ☐ 5x/week
- ☐ 4x/week
- ☐ 3x/week
- ☐ 2x/week
- ☐ 2x w/Wednesday
- ☐ Wednesday Only

If you are registering your child for After-School 2023-2024, please indicate which days they will attend. Check all that apply.

(Note: the total number of days indicated in the question should match the schedule requested above.)

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday

What grade will your child be in for the 2023-2024 school year?

- ☐ Pre-K (after school only)
- ☐ Kindergarten
- ☐ 1st Grade
- ☐ 2nd Grade
- ☐ 3rd Grade
- ☐ 4th Grade
- ☐ 5th Grade
- ☐ 6th Grade

Child's age:

Child's Date of Birth:

MM DD YYYY

Child's Address:

(Please include complete address)

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Parent/Guardian Contact Info

Please provide all requested information. This information is very important since it will be used to contact you or your child's other parent/guardian in case of an emergency.

If your child has only 1 parent/guardian please type "NA" in the section for "Parent/Guardian #2 Info".

Parent/Guardian #1 Info

Full Legal Name

Email Address

Place of work

Work Phone

Home Phone

Cell

Parent/Guardian #2 Info

Full Legal Name

Email Address

Place of Work

Work Phone

Home Phone

Cell

I understand that I must provide documentation of legal status to the YMCA if custody of my child is in dispute.

☐ Yes

☐ No

Does your child have any known allergies?

☐ Yes

☐ No

If you answered "yes" to the above question please list know allergies:

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Does your child have any medical/mental/physical condition(s)?

☐ Yes

☐ No

If you answered "yes" to the above question please list know medical/mental/physical condition(s):

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Does your child currently take medication?

☐ Yes

☐ No

If you answered "yes" to the above question please list the medications:

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Does your child participate in a special education program?

☐ Yes

☐ No

If you answered "yes" to the above question, please list the special educations programs your child participates in:

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If your child participates in special education programs, do they use a one-on-one aide during the school day?

☐ Yes

☐ No

If your child is attending Y Camp, what is your child's swimming ability level?

(Sometimes our summer childcare programs will take field trips to local swimming pools. This information will help us in planning for that.)

- ☐ Non-swimmer
- ☐ Beginning swimmer (comfortable in shallow water)
- ☐ Intermediate Swimmer (comfortable in water over their head)
- ☐ Experienced Swimmer (comfortable in the deep end)
- ☐ Competitive Swimmer

LOCAL Emergency Contacts/Pickups (Non Parent/Guardian)

Please list a **MINIMUM of 3** adults, **in addition to the parents/guardians listed above**, who are authorized to pick up your child. Photo ID will be required for pick-ups.

Please only include **local** emergency contacts.

Emergency Contact # 1 Name & Phone Number

Emergency Contact # 2 Name & Phone Number

Emergency Contact # 3 Name & Phone Number

Emergency Contact # 4 Name & Phone Number

Emergency Contact # 5 Name & Phone Number

**LIABILITY WAIVER, EMERGENCY MEDICAL AUTHORIZATION, MEDICAL
TRANSPORTATION, FIELD TRIP, PHOTOGRAPH
PERMISSION AND DISCIPLINE POLICIES**

On behalf of this minor child, enrolled in The Family YMCA Child Development Program, I hereby release the Y, staff and volunteers from all liability relative to participation in the program. I hereby give my permission to the Y staff to obtain emergency medical care and transportation for my child should the need arise. I understand that I am responsible for any expense incurred for such care. I understand that activities will periodically take place away from the usual program site. I give permission for my child to participate in field trips and off-site activities. I understand that The Y's Child Development programs are considered a public venue therefore my child's photograph could possibly be taken and may be used by the media, for internal publicity, and on the Y's website which will not have the child's name included. I have received a copy of the [current parent handbook](#) or acknowledge that it is online and I understand I am responsible for knowing all policies stated in the handbook, I accept such, including the discipline policies.

By typing my full legal name in the box I am acknowledging that I have read and understand the above statements.

Date of acknowledgement:

MM DD YYYY

Please initial in the field following each each statement to indicate you have read and understand it.

In keeping with our mandate of building strong kids and families and to maintain safe and comfortable facilities, ***all convicted or (Initial) registered sex offenders are excluded from membership and program participation at The Y, and offenders shall not enter into Y property or loiter in the vicinity of Y programs and activities.***

Fee Agreement

Please initial in the field following each each statement to indicate you have read and understand it.

I hereby agree to accept full responsibility for all fees required for my child(ren) to attend The Y's Child Development Programs.

For the After School Program, I understand that all billing is done by an Electronic funds transfer (EFT). The set amount will be withdrawn from my account on the 1st of the month for child care covering that month. I understand that all returned payments are subject to a \$5 processing fee and payments rejected for insufficient funds or a closed account may also be assessed a \$25 NSF fee.

I understand that ***drop-ins will be accommodated ONLY if there is space available AND if the space is paid for in advance.*** I understand that drop in days are non-transferable or refundable.

After School charges have been averaged so that the monthly payments will remain the same throughout the school year, regardless of how many days school is actually in session in a particular month.

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If you are registering your child for ***Y Camp 2023 or End of Summer Camp 2023***, you must pay for it completely when you come in to complete the registration process.

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If you are registering your child for ***After School 2023-2024***, you must pre-pay for the month of August when you come in to complete the registration process.

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In the event that I default on my payments, I understand that my child will be disenrolled from the program and that I will be responsible for any cost of collection.

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I understand that the Y DOES NOT ISSUE TAX STATEMENTS, so all parents must keep track of information if it is needed. There will be a \$25 bookkeeping fee to print out all individual receipts for an entire school year.

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I understand that I must inform the Y OFFICE of any changes in schedule. Changes must be done IN WRITING, two weeks in advance. There is a \$15.00 fee for each change.

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Late Pickup Charges

I understand that if I pick up my child between 5:46-5:50pm, I will be charged a late pick up fee of \$10. If I pick my child up between 5:51-5:55pm, I will be charged a \$20 late pick up fee. If I pick up my child between 5:56-6:00pm, I will be charged a late pick up fee of \$30. This fee is per child and will continue in 15 minute increments at the rate of \$30 per 15 minutes until the child is picked up. ***I understand that late pick-up fees will be automatically charged to my EFT on file within one week of the infraction.***

Special payment arrangements may be available by speaking with the administrative assistant.

Attendance/Withdrawal Policy

Please initial in the field following each each statement to indicate you have read and understand it.

For the After School program, I understand that I must call in my child's absence to the Y office (662-3100). Telling Y staff of my child's absence does not exempt me from the \$25.00 fee. If I do not call the Y a minimum of 45 minutes before school dismissal, I will be charged \$25.00. This fee will be automatically charged to my EFT on file within one week of the infraction. I understand that if the Y staff is not able to notify parents or emergency contacts, the Y is not responsible for the missing child.

I understand that 2 weeks notice is required to terminate enrollment. I understand that I must fill out an exit survey at the Y. Unpaid balances must be cleared before my child's last day at the program. There is a \$25.00 withdrawal fee for withdrawing before the end of the 2023-2024 school year because my child has reserved a spot.

I understand that there are no refunds for absences due to sickness, vacations, mishaps, holidays or unforeseen circumstances (including but not limited to evacuation or natural disaster). PROGRAMS DO NOT OPERATE ON SCHOOL HOLIDAYS, DURING SCHOOL VACATIONS, or SCHOOL SNOW DAYS.

I UNDERSTAND THAT THE YMCA RESERVES THE RIGHT TO DISENROLL, WITHOUT REFUND, ANY CHILD WHO POSES A CONSTANT DISCIPLINARY PROBLEM, JEOPARDIZES THE SAFETY OF HIM/HERSELF OR ANY CHILDREN IN THE PROGRAM OR WHO IS OTHERWISE DISRUPTIVE TO THE PROGRAM.
