

YMCA Child Care Services Branch

Summer Day Camp/Afterschool Program Policy Signature Form

Parents/Guardians, please read each area below carefully. Your signature on this document indicates your acknowledgement, understanding, and agreement with all policies of the YMCA of Western North Carolina.

Policies/Procedures — I have received a copy of the policies/procedures in the Camp/Afterschool Handbook and agree to all policies.

Weekly Deposit — A nonrefundable and non-transferable deposit of \$20 is required to register campers for each weekly camp session.

Registration Fees — A one-time nonrefundable and non-transferable registration fee of \$35 per child, \$50 per family is due at the time of Summer Camp AND Afterschool Registration. Payment of a separate registration fee is required for both programs.

Refunds and Cancellations — Any deposits and other fees paid are non-transferable and will not be refunded due to cancellation.

Insufficient Funds — If drafts or checks are not honored you are still responsible for the payment plus a \$30 service charge applied by Federal Automated Recovery System. Child(ren) will be unable to attend any YMCA program until the account is paid in full.

Subsidy Voucher Participation — I agree to notify the YMCA of any changes in my subsidy voucher status and to abide by the rules set forth by the issuing agency. All subsidy voucher participants are responsible for paying the rate discrepancy between what the YMCA charges and what the voucher will reimburse. The parent/guardian is responsible for any payment for child care not covered by the voucher.

Emergency Treatment/Emergency Transportation — I agree that the operator, YMCA of Western North Carolina, may authorize the physician of their choice to provide emergency care in the event that I cannot be contacted immediately. I authorize for my child to be transported in the case of an emergency when medical attention by a physician is necessary. I understand that the YMCA will not transport children in their personal vehicles at any time and a hospital or fire/emergency department will always be contacted.

I, as the operator – YMCA of Western North Carolina, do agree to secure transportation to an appropriate medical resource in the event of emergency. In an emergency situation, other children in the facility will be supervised by a responsible adult. I will not administer any drug or any medication without specific instructions from the physician or the child's parent, guardian, or full-time custodian. Provisions will be made for adequate and appropriate rest and outdoor play.

Signature of Operator/YMCA Representative: JENNIFER SVENSTRUP AND PAUL VEST Date: June 2010-June 2011

Field Trips/Transportation — I permit my child to leave the YMCA on authorized trips under the supervision of the YMCA staff. A written schedule of all activities to be conducted off the YMCA Camp premises will be posted for parents to review. By signing this form, you give your child permission to be transported in YMCA vehicles. I understand that field trips occur weekly in Summer Camp, but are on an infrequent basis during Afterschool.

Activities Outside the Fenced Playground — I hereby give permission to the YMCA of WNC for my child to participate in developmentally-appropriate supervised activities outside the fenced playground at Buncombe County School locations. I understand this statement is required to be signed for licensing and that this space is still on the school property.

North Carolina Child Care Law and Rules — I have received a copy of the North Carolina Child Care Law and Rules from the YMCA.

Registration Paperwork — Signature on this document indicates responsibility for payments and is the only one who can alter the forms.

Sunscreen: (initial the appropriate statement)

_____ I allow YMCA staff to provide sunscreen for my child (sunscreen product information available by request).

_____ I will provide sunscreen for my child in an individual bottle labeled with their name and grade

School Success — I understand that the YMCA works with the Buncombe County and Asheville City schools to develop and deliver activities that engage and impact children. I give permission for YMCA staff to talk with school staff in regards to my child's grades, behavior and other information.

Behavior Management Policy: I have read this policy in the Handbook and agree with all policies as outlined.

YMCA Statement — I hereby, for myself, my family, heirs, executors, and administrators, waive and release any and all claims and damages I may have against the YMCA of Western North Carolina and their respective agents, representatives, successors, and assigns, for any and all injuries which may be suffered by me or my family in connection with participation in YMCA activities and programs. I agree to adhere to all policies as outlined on this policy/signature page. I also grant full permission to the YMCA to use any photographs or video recording taken of me or my family. I agree to comply with YMCA policies and procedures and understand that my participation can be terminated without refund for exhibiting inappropriate behavior or abuse toward the YMCA staff and/or facilities.

Parent/Guardian Name: _____ Parent/Guardian Signature: _____
(please print)

Child's Name: _____ Start Date: _____