



YMCA
OF WESTERN NORTH CAROLINA

We build strong kids,
strong families,
strong communities.

2007 Summer Camp Registration Form

FOR OFFICE USE ONLY

Child's Name: _____

Send this form with all required initials and signatures, and payment to a participating Western North Carolina YMCA location.

FOR OFFICE USE ONLY

_____ Youth Information Form

_____ Youth Summer Camp Policy Form

_____ Discipline and Behavior Management Form

_____ Recent Color Photo of Child

_____ Copy of Child Immunization Record (Traditional Camp only)

_____ Registration Fee

_____ Weekly Deposit

_____ Subsidy Voucher: If applicable. Three copies per child must be provided by parent. Vouchers are good for one camp location only.

_____ Financial Assistance Forms: If applicable. Must be filled out completely with income information attached. The deadline for F/A is May 4th.

_____ Complete Camp Registration Form:

_____ a. Remind parents to register for all sessions needed to reserve a spot for their child(ren).

_____ b. Pre- and Post-Care registrations are completed as needed.

*Please make sure all sections/lines are completed before accepting registration packet.

2007 Youth Information Form

This youth information is effective for the 2007/2008 Summer Camp and Afterschool Programs.

My child is a: YMCA member Child of adult member Program participant Date of registration ____/____/20____

Child's Information

Child's name (first/middle/last) _____ Name called _____

Address _____ City _____ Zip _____

Male Female Birth date ____/____/____ Age (as of June 2007) _____ Grade (as of Aug. 2007) _____

School _____

If the program has an early release (i.e. inclement weather), my child will: (Afterschool program use ONLY.)

Ride the school bus home Be picked up by a parent at school Attend YMCA Afterschool

Check all that apply to your child:

Allergies: (Please check appropriate box and list specific allergies.)

Food _____ None

Poison ivy, seasonal, insect sting _____ None

Current Medications: (Prescribed only – send in original bottle) _____ None

Any specific activities to be encouraged or limited by physician's advice: (explain) _____ None

Special needs/disabilities (health, physical, emotional, or educational) for YMCA Staff awareness. (Please refer to parent handbook for additional information on our policies and procedures.):

 None

Swimming Ability (check one): Non-Swimmer Beginner Intermediate Advanced

Family Information (check one parent to contact for payment and other questions)

Parent/guardian's name _____ Employer _____

Home address _____ City _____ Zip _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

E-mail address _____ (providing an e-mail address authorizes e-mail communication about your child's programs)

Parent/guardian's name _____ Employer _____

Home address _____ City _____ Zip _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

E-mail address _____ (providing an e-mail address authorizes e-mail communication about your child's programs)

Emergency Information

In case of emergency, please contact the following first: Mother/Guardian Father/Guardian

Child's doctor _____ Doctor's phone # _____

Child's dentist _____ Dentist's phone # _____

Hospital preference _____

Insurance company _____ Policy # _____

Emergency Contact and Youth Pickups (if mother, father or guardian cannot be reached):

These names apply to all YMCA of Western North Carolina programs as your child's pickups until written requests are made to remove any names listed.

People listed to pick up children must be 18 years of age or older and must have a photo ID with them when picking up children.

1. Name _____ Relationship to child _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

2. Name _____ Relationship to child _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

3. Name _____ Relationship to child _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

4. Name _____ Relationship to child _____

Home # _____ Work # _____ ext. _____ Mobile # _____ Pager # _____

Discipline and Behavior Management Policy

The YMCA staff will use positive behavior management techniques that are developmentally appropriate and adhere to the YMCA's four core values of caring, honesty, respect, and responsibility. The use of corporal punishment is strictly prohibited.

Behavior Management Techniques

YMCA staff will:

1. Involve the children in the development of the "house rules."
2. Maintain consistent behavior expectations and reinforce the YMCA's four core values.
3. Guide children by setting clear, consistent, fair limits for program behavior.
4. Use natural and logical consequences.
5. Redirect children to a more acceptable behavior or activity.
6. Use positive reinforcement, including a positive behavior recognition program.
7. Make eye contact and listen when children talk about their feelings and frustrations.
8. Guide children to resolve their own conflicts through the use of conflict resolution skills.
9. Use effective praise that is immediate, sincere and specific.
10. Modify and structure the environment to attempt to prevent problems before they occur.

Discipline Action Steps

YMCA staff will utilize the following forms of discipline:

1. "Personal Time" — removal of child from a situation for up to 5 minutes so they can regain control of their behavior.
2. Verbal or written communication to parent/guardian regarding a child's behavior.
3. Behavior Contract and/or Behavior Improvement Action Plan
4. Behavior Write-Up
 - Three behavior write-ups in any school year results in the suspension of the child for one week at the end of the day of the third write-up. The parent/guardian is responsible for contacting the program director to set up an appointment to discuss the child's behavior.
 - If the child is reinstated and then receives a fourth behavior write-up, the site director will suspend the child immediately. If necessary, the parent will be notified to pick up the child. Upon the fourth report, the child will be terminated without the right of reinstatement.
5. Suspension — Serious behavior problems will result in immediate suspension from the program.
6. Termination — The YMCA program cannot serve children who display chronically disruptive behavior. Chronically disruptive behavior is defined as verbal or physical activity which may include, but is not limited to, the following:
 - behavior that requires constant attention from the staff,
 - behavior that inflicts physical or emotional harm on other children or self,
 - behavior that abuses the staff and/or ignores or disobeys the rules.

If a child cannot adjust to the program setting and behave appropriately, the child may not be able to return to the program. Reasonable efforts will be made to assist children in adjusting to the program setting.

I, the undersigned parent/guardian of _____ (child's full name), do hereby state that I have read and received a copy of the facility's Discipline and Behavior Management Policy and that the facility's director/coordinator (or other designated staff member) has discussed the facility's Discipline and Behavior Management Policy with me.

Date of Child's Enrollment: _____

I have read, understand and agree with the policies as stated in this document and have discussed the expectations of behavior with my child.

Parent/Guardian _____

Date _____

YMCA Youth Summer Camp Policy 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. Please initial next to each statement.*

1. This section is required for all YMCA Summer Camp participants: *(Please initial on each line.)*

- _____ **Weekly Deposit** — A nonrefundable and non-transferable deposit of \$15 is required to register all campers for each weekly camp session.
- _____ **Registration Fees** — A one-time nonrefundable and non-transferable registration fee of \$35 per child, \$50 per family for traditional and teen camp programs or \$15 per child, \$25 per family for preschool camp programs is required one week prior to your child(ren) starting camp.
- _____ **Late Registration Policy** — A \$20 charge (plus full session fee) will be added per week per child for registrations not received a week prior to the requested session start date. All required documents must be submitted before a child will be registered for camp. There will be NO exceptions. Registrations accepted pending camp space availability.
- _____ **Refunds and Cancellations** — Refunds will not be given and any deposits or other fees paid are non-transferable and will not be returned for cancellation.
- _____ **Late Payments** — A \$20 late payment fee will be required for any balance not paid by 6:00 p.m. the Wednesday prior to each week's camp session (unless otherwise noted for non-camp programs). I understand the policies concerning payments, cancellations, and refunds. I may not register my child for any new program until outstanding balances due on past programs at any YMCA of Western North Carolina branches are paid. Payments can be made at any of the YMCA branches, on-line at www.ymcawnc.org, or via phone. The YMCA accepts Visa or Mastercard credit cards, check, or cash. If payments are not received at the required payment deadline, my child will not be able to attend the program.
- _____ **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.
- _____ **Emergency Treatment and Emergency Transportation** — I agree that the operator, YMCA of Western North Carolina, may authorize the physician of his/her choice to provide emergency care in the event that neither I nor the family physician can 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 staff is never to 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 Soenstrup Date: June 2007-August 2007

- _____ **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. A permission slip must be signed and returned before each field trip.
- _____ **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 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 (please print): _____ Parent/Guardian Signature: _____

Child's Name (Please print): _____ Date: _____

2. This section is required for all YMCA Traditional Camp Sites: *(Please initial on each line.)*

- _____ **Activities Outside the Fenced Playground** — I hereby give permission to the YMCA of Western North Carolina for my child to participate in developmentally-appropriate supervised activities outside the fenced playground. This authorization is valid for the 2007-2008 school year.
- _____ **Program Handbook** — I have received a copy of the Program Handbook and agree to all the policies.
- _____ **North Carolina Child Care Law and Rules** — I have received a copy of the North Carolina Child Care Law and Rules from the YMCA of Western North Carolina.
- _____ **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 County Child Care Services. All subsidy voucher participants are responsible for paying the rate discrepancy between what the YMCA charges for the Summer Camp Program and what the State of North Carolina will pay. The parent/guardian is responsible for any payment for child care not covered by the county.
- _____ **Summer Camp Program Registration Paperwork** — I understand and agree to complete the registration paperwork completely and leave no areas blank and attach all required documents or my child will not be able to attend the program. The person who completes the registration paperwork is responsible for the 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 choose to provide sunscreen for my child in an individual bottle labeled with their name and grade (this bottle will be given to a YMCA staff upon my child's arrival to camp.)

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