



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

We are honored that you have become a part of the YMCA Younger Days family. We share a small amount of your child's life and are privileged to be given the opportunity. Our goal is to impact our students' lives educationally, emotionally and socially, as well as teach them the core values of honesty, respect, responsibility and caring, so they are provided with a strong foundation for their educational career. We look forward to working as a family to help each child reach goals that are set for them throughout their time at YMCA Younger Days Child Care Center. We strive not only to provide a challenging academic program but a secure, personal environment of care to each individual student. We hope that we can exceed all our families' expectations and want to take this time to personally welcome your family to The YMCA Younger Days Child Care Center.

The Younger Days Staff

Below are a few important items for you:

1. **\$50 Non-refundable family registration fee** is due at time of enrollment.
2. If your child is enrolled FULL TIME, he/she are eligible for a **FREE YMCA membership**. Please see the childcare director for a membership application or stop in and get one from the front desk at the YMCA. This membership application must be signed by the director, Jennifer Cooper, before the YMCA will process it as a free membership.
3. **Tuition** can now be made online through MyProcure.com or on the Procure app. We can also take your weekly tuition payment in the office using credit/debit cards, check or cash. You must provide us with your valid email address. Your account is connected through the email address you provide. MyProcure is a safe and secure site. This option has been added to make your childcare payment even easier.
 - Go to MyProcure.com
 - Enter your email address (the email you provided us) and choose Go.
 - Enter the code that will be sent to your email, choose a password, and press GO.
 - Then you may:
 - View your child's account, immunizations and make a payment on your account.
 - Use the Pay button to make a payment.
4. We offer your older child a discount of 15% when enrolling two or more children.
5. We are a **tuition-based program**. This means you are paying for your spot even if your child is not here. We do offer two free weeks of vacation in a calendar year. These must be used in week increments Monday-Friday and your child **CANNOT** attend at these times.

Thank you for entrusting your children with us.



Child Care Enrollment Form

Child's Name _____ Birth Date _____
Address _____ Phone _____
Parent/Guardian Signature _____
Email address _____

Please check the program your child will attend. A separate form must be used for each child.

Younger Days Infant Care

Full Time Care (four or five days a week) \$165.00/week
 Half Time Care (three days or less a week) \$123.00/week

Younger Days Toddler Care

Full Time Care (four or five days a week) \$160.00/week
 Half Time Care (three days or less a week) \$120.00/week

Younger Days Preschool Age Care

Full Time Care (four or five days a week) \$150.00/week
 Half Time Care (three or less days a week) \$110.00/week

Preschool (M/W/F 8:30-12:15)

Preschool only \$120.00/month

Younger Days After-School Care Elementary School Attending _____

Before AND After School Care

Full Time Care (four or five days a week) \$85.00/week
 Half Time Care (three or less days a week) \$60.00/week

Before OR After School Care

Full Time Care (four or five days per week) \$63.00/week
 Part Time Care (three or less days per week) \$45.00/week

New Policies:

School age two-hour delay or early dismissal \$10 per day

School age non-school day (snow day, Act 80, or holiday) \$15 per day

ELRC children that exceeds 40 absences will be charged \$10/day for each absence beyond the allowable 40 days.

Families may suspend or take two "vacation" weeks (in 5 consecutive days) each calendar year. After two weeks you will be charged regardless of attendance.

EMERGENCY CONTACT / PARENTAL CONSENT FORM

55 PA CODE CHAPTERS 3270.124(a)(b), 3270.181 & 182, 3280.124 (a)(b), 3280.181 & 182, 3290.124 (a)(b), 3290.181 & 182

CHILD'S NAME			BIRTHDATE
ADDRESS			
MOTHER'S NAME/LEGAL GUARDIAN			HOME TELEPHONE NUMBER
ADDRESS			
BUSINESS NAME			BUSINESS TELEPHONE NUMBER
ADDRESS			
FATHER'S NAME/LEGAL GUARDIAN			HOME TELEPHONE NUMBER
ADDRESS			
BUSINESS NAME			BUSINESS TELEPHONE NUMBER
ADDRESS			
EMERGENCY CONTACT PERSON(S)	NAME	TELEPHONE NUMBER WHEN CHILD IS IN CARE	
PERSON(S) TO WHOM CHILD MAY BE RELEASED	NAME	ADDRESS	TELEPHONE NUMBER WHEN CHILD IS IN CARE
NAME OF CHILD'S PHYSICIAN/MEDICAL CARE PROVIDER			TELEPHONE NUMBER
ADDRESS			
SPECIAL DISABILITIES (IF ANY)		ALLERGIES (INCLUDING MEDICATION REACTION)	
MEDICAL or DIETARY INFORMATION NECESSARY IN AN EMERGENCY SITUATION		MEDICATION, SPECIAL CONDITIONS	
ADDITIONAL INFORMATION ON SPECIAL NEEDS OF CHILD			
HEALTH INSURANCE COVERAGE FOR CHILD or MEDICAL ASSISTANCE BENEFITS		POLICY NUMBER (REQUIRED)	
PARENT'S SIGNATURE IS REQUIRED FOR EACH ITEM BELOW TO INDICATE PARENTAL CONSENT			
OBTAINING EMERGENCY MEDICAL CARE		ADMIN. OF MINOR FIRST - AID PROCEDURES	
WALKS AND TRIPS		SWIMMING	
TRANSPORTATION BY THE FACILITY		WADING	

PERIODIC REVIEW

_____ SIGNATURE OF PARENT or GUARDIAN

_____ DATE

_____ SIGNATURE OF PARENT or GUARDIAN

_____ DATE



Escort Sheet (who is allowed to pick up your child)

Child's Name _____

Parent/Guardian signature _____

Parent's Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____

Name _____ Phone _____

Address _____

Parent/Guardian Signature _____ Date _____