



# Childcare Registration Form

Child's Name \_\_\_\_\_ Grade (Fall 2021) \_\_\_\_\_

Program Attending ☐ GSRP ☐ Montessori ☐ YMCA Childcare ☐ Other \_\_\_\_\_

YMCA Membership Status ☐ Member ☐ Non-Member

Cost	GSRP	MONTESSORI	YMCA CHILDCARE
Before Care (6:45 AM–Start of School)	<input type="radio"/> \$13/week	<input type="radio"/> \$16/week	Weekly Rate \$ _____ determined by age & times
After Care (4:00–6:00 PM)	<input type="radio"/> \$20/week	<input type="radio"/> \$25/week	
Full-Day (7:00 AM–6:00 PM)	<input type="radio"/> \$40/day	<input type="radio"/> \$40/day	
Half-Day	<input type="radio"/> \$20/day	<input type="radio"/> \$20/day	

## Admission Agreement *Please initial each line*

	<b>POLICIES AND PROCEDURES</b> – I have reviewed or will access the handbook online, including the discipline policy, and understand all policies and procedures therein. I further understand that the center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans. The notebook will be available to parents for review during regular business hours. Licensing inspection and special investigation reports from at least the past two years are available on the Bureau of Community and Health Systems website at <a href="http://www.michigan.gov/michildcare">www.michigan.gov/michildcare</a> .
	<b>PAYMENTS</b> – I understand that payments that are more than one draft behind will result in your child being removed from child care. It is required to have an EFT on file in order to register for the program.
	<b>MEDICATIONS</b> – I understand that a Medication Form is required to be completed and signed by a parent/guardian should my child need any medication administered during the program. I further understand that we allow the self-carry of Emergency Medications ONLY for children diagnosed with asthma or other relevant conditions. Self-carry is only permitted with the prescribing physician's written permission.
	<b>CUSTODY</b> – YMCA requires a legal document or court decree, otherwise decisions regarding who is authorized to pick up a child will be governed by the Primary Parent/Guardian information listed on this document.
	<b>PHOTO RELEASE</b> – The YMCA is hereby granted permission to use any individual or group photograph and/or videotape showing my child in YMCA activities for use in public relations, promotional or advertising purposes
	<b>YMCA PROGRAM CLOSURES</b> – I understand, during inclement weather, the YMCA will not refund or pro-rate the fee. We will use an app to communicate closures.
	<b>PLAYGROUND USE</b> – I understand that this program uses the space available at our site locations, which meets the safety standards set by LARA.
	<b>MEALS</b> – I understand that I am required to provide food, milk, or formula for my child while in YMCA care. If I do not provide these items, the center will provide them for the day, and they will notify me about the center agreement.
	<b>COVID-19</b> – I understand it is my responsibility to provide a mask for my child to comply with the state requirements according to the Governor's office and state reopening plan. I also understand the health risks.

I have read the **Admission Agreement** and fully agree to its terms. I have also read and accept the Policies and Procedures listed in the parent handbook and stated within this agreement. I also agree to keep all information as it relates to this paperwork, up to date for the safety of my child. By signing, I hereby release the YMCA of Greater Michiana, its officers and employees from responsibility of personal injury or personal property damage associated with the program or its property. I consent to full understanding and knowledge of inherent risks and voluntarily accept responsibility for any such occurrence not related to gross negligence.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_