



ASHLAND YMCA KINDER, JUNIOR AND SENIOR SUMMER CAMP REGISTRATION PACKET

Thank you for your interest in the Ashland YMCA Summer Camp. Enclosed is important registration information. Our center is open from 6:30am until 6:00pm.

Preschool Camp is for children ages 3-5 who are potty-trained.

Kinder Camp is for those who have **completed** Kindergarten or will be entering Kindergarten in the fall.

Junior Camp is for those who have **completed** 1^{st} grade through 2^{nd} grade. Senior Camp is for those who have **completed** 3^{rd} grade through 5^{th} grade.

Please complete and submit your registration paperwork along with a non-refundable \$25.00 registration fee/per child (\$50.00 maximum) for approval and acceptance by Christie Krumlaw, Preschool/Youth Director. The registration fee is waived if your child is continuing to Summer Camp from a current YMCA school program if you have already paid the registration fee for the school year.

To receive Member rates for the program, you must show proof of membership or Partner With Youth eligibility at the time of registration.

Due to high demand we cannot prorate or accommodate other than what is listed.

We are planning an eventful summer for your child while they are in our care. My hope is that you and your child have a positive experience in our program this summer. We look forward to getting to know each of you and creating fond memories at the Ashland YMCA Summer Camp!

Sincerely, Christie Krumlaw Child Development Director Ashland Family YMCA 419-289-0626 ckrumlaw@ashlandy.org

Please note: You are not considered registered until you receive email confirmation from Christie Krumlaw, Preschool/Youth Director.



Summer Camp Calendar 2024

June

3rd-4th Closed for Cleaning and transition into Summer Camp **5th- First Day of Summer Camp**

<u>July</u>

4th- Fourth of July CLOSED No care provided

August

16th- Last Day of Summer Camp!

19th-23rd- Shut Down Week (No Care Provided)

26th- First Day of School (Ashland City Schools)

26th-30th Care provided for those transitioning into Preschool or "Y" Kids

September

2nd- Closed for Labor Day

3rd- Closesd for Cleaning and room transition into school year

Preschool and "Y" Kids begin September 4th

** The Ashland Family YMCA follows Ashland City Schools Academic Calendar



Kinder, Junior and Senior Summer Camp Registration

Child's (FULL) Name				
Address		City	S	tateZip
Email				
Grade Completed This School Year Birthday				
Mother/Guardian		Pho	PhoneWork	
Father/Guardian		Phor	neWork	
*Please Mark Days and T	īmes Your	Child Will Atten	d.	
Mon Tues IN/OUT IN	/OUT	Wed IN/OUT	Thur IN/OUT	Fri IN/OUT
2-3 DAYS	Member		\$405	
2 3 DATS	Guest		\$560	
4-5 DAYS	Memb	er	\$605	
. JAIJ	Guest		\$735	

Parent/Guardian Signature

^{*}Prices reflected above are based on a monthly basis. We do not offer part time care, or prorating. The prices listed above is the rate you will pay. **There will be a \$10 discount if scheduled payments are set up.**



Date ____



Junior and Senior Summer Camp Financial Agreement

I Understand:

- There is a registration fee due yearly of \$25 with a maximum of \$50.
- Payments and ODJFS payments are due first of every month. A \$20 late fee will be added on the 10th.
- Payments can be made by check, credit card, cash, or money order.
- The rate charged is the rate and days that your child is signed up for, unless changed with the administration. There will be no prorating.
- Payments are expected in full regardless of attendance of the child.
- A two week notice is required for withdrawal from the program or change in your child's schedule.
- If we receive a returned check you will be charged a \$30.00 processing fee. Two returned checks will result in payments being accepted via money order or cash only.

Parent/Guardian Signature

Administrator Signature
HANDBOOK ACKNOWLEDGEMENT
Please feel free to ask the director any questions about the policies in the handbook.
I acknowledge that I have had access to a copy of the parent handbook for the Ashland Family YMCA Summer Camp. I agree to follow all policies outlined within.
Parents, after reading the handbook, please sign and return this page to the director.

Parent/Guardian Signature





<u>Ashland Family YMCA Summer Camp</u> <u>Emergency Pickup Information</u>

Persons authorized parent: Must name	to pick up child from camp of AT LEAST one.	ther than custodial
Child's Name		
Parent who should b	oe contacted FIRST	
PHONE NUMBER		
Person to contact S	ECOND	
PHONE NUMBER		
Authorized pick u <u>Name</u>	<u>Relationship</u>	<u>Phone Number</u>
۷		
3		
4		



YMCA Summer Camp T-SHIRTS and BAGS

Every summer, you may purchase a summer camp T-shirt. The shirts are \$11.00 and cover the cost of the t-shirt and printing. The bag is \$7.00 and is water resistant. This would be a good bag for swim days and Brookside trips. Please send this in with a check made payable to the Ashland YMCA. Please give check to Christie Krumlaw NOT the front desk for records purposes! Payment must be turned in with registration.

There is an event fee for those who will be in attendance on Fridays. This fee is \$50 per child. This covers any fee involved with our special events on Fridays, including but not limited to pool entry, bowling, and roller skating.

Child's Name						
Shirt Sizes: CXS CS	CM	CL	AS	AM	AL	
Bag Colors: Purple San	gria (Green	Red	_ Royal	Orange	
Parent/Guardian	Signature	e				
*The shirt and Event fee i					e offer to the che n those activities	
Administrator u	se only:					
Enclosed	\$11.00 for	the cost	of the shirt			
Enclosed	\$7.00 for tl	he cost o	f the bag			
Enclosed	\$18.00 for	the cost	of a shirt ar	nd bag		
Enclosed S	\$50.00 ever	nt fee				
Check Nu	mber	Cash	1			



Ashland YMCA Summer Camp Photo Release

The Ashland YMCA shares photographs of classes and participants on our Homeroom page to show families what we do daily. We would like your permission to use photographs of our day on the Homeroom page. If you do not grant permission, please indicate this below.

I GIVE the YMCA permission to use photographs of my chi	•
	on the Homeroom
page.	
X	Date
I DO NOT grant permission to the YMCA to use photograp	
page.	
X	Date
General Permission Slip for Swimming, Gymnastics <u>Trips, and Ashland Transit.</u>	s, Walking Field
<u>irips, and Asmand Transit.</u>	
Child's Name	_DOB
My childhas my permission to participate in the YMC	A swimming
program. The center will have two supervising staff and ce	rtified life guards
on duty at all times.	
My child also has permission to participate in gymna	
be supervised and assisted during gymnastics, to maintain	a safe and healthy
environment.	
My Child has permission to ride the Ashland Transit	
Brookside Park Pool on Friday's and other occasions transit	is needed.
Children will be taught safety while on walking trips, under	the supervision of
the classroom teachers.	
My Child is aSwimmer (Can swim in the deep end if they p	pass the swim test)
Non-swimmer (Must stay in the shallow end))
Needs a Life Jacket (Stays in the shallow en	nd with life jacket)
Parent/Guardian Signature	



Behavior Management Policy

It is our goal here at the Ashland YMCA Junior and Senior Camp to provide a fun, healthy, safe and secure environment for our students. The YMCA teaches core values of caring, honesty, respect, and responsibility. Children who attend this program are expected to follow the behavior guidelines and to interact appropriately in a group setting.

Behavior guidelines:

- * Children are **responsible** for their actions.
- * We **respect** each other and the environment.
- * **Honesty** will be the basis for all relationships and interactions.
- * We will **care** for ourselves and those around us.

When a child does not follow the behavior guidelines, we will take the following steps:

- 1. Staff will redirect the child to a more appropriate behavior.
- 2. The child will be reminded of the behavior guidelines and will have a constructive discussion. The child may be placed in a quiet place to compose themselves and find the appropriate behavior and be removed from the activity.
- 3. A parent will be contacted if positive results are not gained.
- 4. Staff will document all behavior and the action that was taken.
- 5. Staff will schedule a meeting with the parent if unable to resolve the issue.
- 6. If at any time the child's behavior threatens the safety of that child, other children or a staff, the parent will be notified and expected to pick up the child immediately.
- 7. If a problem becomes persistent and the child continues to disrupt the program, the Ashland YMCA reserves the right to suspend the child from the program. Expulsion from the program will be considered in extreme situations.

I have read and understand the above stated discipline policy.

Parent Signature	Date
Child's Signature	Date



Brookside Pool

On Friday afternoons the Junior and Senior campers will be transported to Brookside pool by Ashland Transit. We will eat lunch at the YMCA at 11:30 and then leave for the park around 1:00. Please pack sunscreen and entrance fee. Children up to 9 years of age are \$4 and ages 10 and up are \$5. If your family has a pass, please send the number in and have your child write it on a tag for their backpack. Your child is welcome to bring up to \$5 for the snack bar, however, the staff will not be responsible for it. In the event of inclement weather, we will transport your child back to the YMCA and you will receive a call as soon as possible. Please pick your child up from Brookside Park Pool, and be sure to let a teacher know your child is leaving.

Brookside/Ashland Transit Permission

Child's Name	DOB
Has my permission to go with to Brookside Park Pool and ride Ashlaread, understand and agree with all be maintained at all times. Emergen taken on all trips. A staff member training on site at all times. Staff members with times in the event of an emergency.	the safety rules. Staff ratios will cy files and a first aid kit will be ained in CPR and First Aid will be will have cell phone access at all
Does not have permission to g Program to Brookside Park Pool. I wi up by 11:30am on the Fridays that t	ill arrange to have my child picked
Parent/Guardian	Date



Brookside Guidelines

- 1. Campers will need to pay every Friday. If you have a pool pass let a staff member know the number if your child has trouble remembering.
- 2. Campers may bring \$5 for snack, and we will bring a snack to share at the park.
- 3. Campers must bring their own suit and towel. We do not permit sharing of towels.
- 4. All Campers must bring Sunscreen. We may not share sunscreen due to allergies. NO AEROSOL CANS
- 5. No camper will be allowed in the deep end of the pool without passing the YMCA swim test.
- 6. Brookside does not allow any flotation devices at all. You may bring goggles but no snorkel masks that cover the nose.
- 7. Use the buddy system at all times.
- 8. Campers must tell a teacher every time they are switching locations, going to the restroom, or filling up water bottles at the drinking fountain and use the buddy system when doing these things.
- 9. Campers may not leave the pool area.
- 10. Campers are responsible for their personal property. Staff will not be held accountable for lost items.
- 11. Campers not following these rules will not be permitted to attend Brookside Park Day and parents will make alternate arrangements.
- 12. Parents are responsible for picking up their child at Brookside Pool and notifying a staff member at regular pick up time.

I understand these safety rules. Parent/Guardian Signature Date Child's Signature Date



JR/SR Summer Camp Scheduled Payment Authorization/Agreement

Iauthorize my bank to make payment to	the Ashland YMCA			
by method indicated below, and post it to my account for my child				
's care at the Ashland YMCA Summer Camp.				
(please circle the appropriate $\boldsymbol{membership\ status}$ and \boldsymbol{amount}	of days.)			
4-5 DAYS Member				
4-5 DAYS Member 2-3 DAYS Non-member				
Amount Paid on theof each month (if	no date is given it			
will be taken on the first of every month)				
Checking Bank Name				
NOTE: for checking account authorization, a voided check is need	ed			
Account # Routing#				
Credit Card Mastercard Visa Discover Other_				
Expiration Date/(For credit card payments)				
Address				
City State Zip				
Home Phone Cell Phone				
I understand that I am in full control of my payment, and if at an make any change or discontinue the service, I will call or write the two-week notice is needed to make any changes. Change of payn other provisions and terms of my contract. Signature Date	e above company. A			
Staff Witness Date				
Scheduled Payment Agreement I UNDERSTAND that when enrolling in the Ashland YMCA Summer Scheduled Payment as the method of payment, I am committing period of time for the school year, which will be taken out of my coredit card account monthly on the first of every month. I also any outstanding payments not received within 60 days will be tur Collection agency. Returned items or denied transactions will have charged. Initials	to a nine-month hecking, savings, or understand that ned over to RBC			



YMCA PHOTO/AUDIO VISUAL/NARRATIVE RELEASE

I am 18 years of age or older and, if not, my parent or legal guardian has also provided their consent by signing below.

Consent & License. For my participation in activities to be conducted by the National Council of Young Men's Christian Associations of the United States of America ("YMCA of the USA") or any of its chartered member associations in the United States (collectively "the Y"), and collaborating third parties, I consent, now and for all time, to the making, reproduction, editing, broadcasting or rebroadcasting of:

- 1. video film or footage of me,
- 2. sound track recordings of me
- 3. photo reproductions of me
- 4. any narrative account of my experience

My consent includes a perpetual license to the Y and collaborating third-parties for the use of the above materials for publication, display, sale or exhibition in promotions, advertising, education and commercial uses. Use includes reproductions in any form and media currently existing or later conceived, adaptations and/or revisions, throughout the world in perpetuity.

I understand and agree there may be no additional compensation for this license, and I will not make any claim for payment of any kind from the Y or collaborating third-parties. I may, or may not be, identified in such licensed uses; however, my name will not be used to endorse any particular products or services.

Ownership, Confidentiality, and Shared Use. With respect to any of the above uses, I further agree:

- 1. All works shall belong to YMCA of the USA;
- 2. The Y has no duty of confidentiality regarding any licensed uses;
- 3. YMCA of the USA shall exclusively own all known or later existing rights to the uses throughout the world;
- 4. The Y and collaborating third-parties may use any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account for any purpose without additional compensation to me.

Release from Liability. I agree that my consent is irrevocable. I hereby release and discharge The Y and collaborating third-parties, from any and all claims, actions, lawsuits or demands of any kind arising out of my consent, license grants, uses, or the shared uses of any works or materials referenced herein.

Signature:	Date:	
Printed Name:	Age:	_
Address:		
I am the parent or legal guardian of and grant the licenses detailed in the foregoing on behalf of my minor		I hereby consent
Signature of parent or legal guardian:		
Printed name:		



Child's NameDOB_
Summer Camp Registration Checklist
Registration form
Registration fee
Financial Agreement
Handbook Acknowledgment
Pick Up Information
Roster Permission
T-shirt/bag
Homeroom Photo release
General Permission Form (Swimming, gymnastics and Brookside)
Y Photo Release
Behavior Management Policy & Brookside Guidelines
Scheduled Payment Form
Medical Statement (Kinder only)
Child Enrollment and Health Information (JFS 01234)
Child Medical/Physical Care Plan (JFS 01236)
Registration completed when: (office use only)
Physical List (Kinder only)
Photo Release <u>Y/N</u> Homeroom <u>Y/N</u> YMCA
Roster
Daxko
Brookside Permission List
Scheduled Payment <u>Y/N</u>
Medical Alert
Attendance
Email List



____Welcome Letter sent _____(Date sent)

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY