



Application Checklist for Before & After Care for Parents

Membership Checklist: (Full Facility OR Community)

☐ Completed Member Application: this application must be completed whether you choose to be a Full Member of the YMCA, or choose to be a Community Non Member.

☐ Activate Membership Unit in Person at the YMCA (with proof of Account and Routing Number **if** using a bank for payment see back of membership form)

*****Program does not require membership to Y to register, however full facility members receive a discount on program fee. Membership may be activated online by a parent or completed at the YMCA in person.

Registration Check List-Did you include the following? (this is not online)

- ☐ Registration Packet (Attached) with parent handbook signature
- ☐ Completed Health Form with immunization
- ☐ If your child has been vaccinated, please provide a copy of their COVID-19 Vaccination Record Card (optional)
- ☐ Authorization for the Administration of Medication (Required if medication present)
- ☐ Medication Administration Record (MAR) (Required if medication present)
- ☐ Asthma Action Plan (Required if medication present)
- ☐ Individual Plan of Care (Required if medical condition present)
- ☐ Food Allergy and Anaphylaxis Emergency Care (required if medication present)
- ☐ Medication (Must be in original box with prescription label)
- ☐ Snow Day Vacation Day Program Registration and down payment (if interested)
- ☐ Care 4 Kids Application if qualified & Assistance needed (Care 4 Kids is optional)
- ☐ Care 4 Kids Parent Provider Agreement form Completing C4K Application (optional)
- ☐ Tax Forms, Paystubs, Benefits, etc. (Attach to C4K or Financial Assistance App)
- ☐ Pay 1st Month Tuition paid to YMCA
- ☐ Pay \$25 non-refundable, non-transferable registration fee

I am aware that if I do not have all the necessary paperwork found in the Registration checklist above and proper payments for tuition/registration fee paid, my child will not be able to start in the program.

Signature

Date



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2022-2023 Before & After School Registration

PLEASE INCLUDE A COPY OF AN UPDATED PHYSICAL AND IMMUNIZATION RECORD
CHILD CAN NOT START THE PROGRAM WITHOUT CONFIRMATION CALL/EMAIL FROM DIRECTOR

Student Information:

Child's Name: _____ Gender M F Date of Birth ____/____/____

School Attending _____ Grade going into _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Grade _____ Child lives with: ____ Mother ____ Father ____ Grandparents ____ Foster

Race / Ethnicity: ____ White ____ Asian/Pacific Islander ____ American Native/ Alaskan Native ____ Black, not of Hispanic origin
____ Hispanic ____ Other

Income: ____ Below 20,000 ____ 20,000-30,000 ____ 30,000-40,000 ____ 40,000-50,000 ____ over 50,000

Family Information:

Parent 1 _____ Parent 2 _____

Address: _____ Address _____

City _____ State _____ Zip Code _____ City _____ State _____ Zip Code _____

Home Phone _____ Home Phone _____

Cell Phone: _____ Cell Phone _____

Email _____ Email _____

Employer _____ Employer _____

Employer Address _____ Employer Address _____

Work Phone _____ Work Phone _____

Permission to Release and Emergency Contacts (Other than parents). **Persons picking up must be at least 18 and provide a photo ID when picking up. Copies of ID's will be taken:**

Name: _____ **Relationship:** _____

Home: _____ **Cell:** _____

Name: _____ **Relationship:** _____

Home: _____ **Cell:** _____

Name: _____ **Relationship:** _____

Home: _____ **Cell:** _____

Name: _____ **Relationship:** _____

Home: _____ **Cell:** _____



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Please list any person(s) who are not allowed to pick up your child. Any person who is not allowed to pick up said child must provide a copy of the restraining order or court order.

Siblings:

Name	Ages	Birthdate

Medical Information:

Doctor: _____

Address: _____ Phone Number: _____

Dentist: _____

Address: _____ Phone Number: _____

Naugatuck YMCA School Age Program will close in observance of the following days:

New Year’s Day Fourth of July Labor Day Good Friday Memorial Day
Thanksgiving and Friday after Christmas Break (Dec. 24- Jan. 1)

I understand that by signing this contract with the YMCA Before and After Care Program, I am responsible for following the policies set by Naugatuck YMCA, including paying my child’s tuition, registration fee and late fees that may occur. I understand that rates are subject to change with a 30 day notice.

Parent Signature _____

Date _____

Directors Signature _____

Date _____



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MONTHLY TUITION

Tuition is based on Naugatuck Public School schedule. We will have the same half days and no school days as the public school. Yearly tuition is divided into 9 equal monthly payments. Payments are due the last Friday of the month prior to service.

Care 4 Kids accepted and financial assistance available for both monthly membership and tuition fees. Please apply for Care 4 Kids first.

YMCA Youth Membership	\$15.00 Monthly	N/A
	Y Member	Community Member
BEFORE CARE 7am-8:55am	5 days per week/ \$240 per month (\$60 per week)	5 days per week/ \$280 per month
BEFORE CARE 7am-8:55am	3 days per week/ \$180 per month (\$45 per week)	1-3 days per week/ \$210 per month
AFTER CARE 3:25pm-6:00pm	5 days per week/ \$340 per month (\$85 per week)	5 days per week/ \$390 per month
AFTER CARE 3:25pm-6:00pm	3 days per week/ \$240 per month (\$60 PER WEEK)	1-3 days per week/ \$314 per month
NO SCHOOL DAYS 7am-6pm	Per Day \$45	Per Day \$60
PUBLIC SCHOOL HALF DAYS Dismissal-6pm	After care participant \$0 Non-aftercare participant \$30	Per Day \$35

Pricing subject to change with a month notice.



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Security Deposit: First Month Tuition is required

One time registration Fee: \$25 non-refundable, non-transferable

Please check off schedule needed.

BEFORE CARE 5 Days a Week 7am-8:55am	
BEFORE CARE 3 Days a Week 7am-8:55am	
AFTER CARE 5 Days a Week 3:25pm-6:00pm	
AFTER CARE 3 Days a Week 3:25pm-6:00pm	
NO SCHOOL DAYS 7am-6pm	
Tuesday, November 8, 2022	
Friday, November 11, 2022	
Wednesday, November 23, 2022	
Monday, January 16, 2023	
Monday, February 20, 2023	
Tuesday, February 21, 2023	
Friday, April 7, 2023	
Monday, April 10, 2023	
Tuesday, April 11, 2023	
Wednesday, April 12, 2023	
Thursday, April 13, 2023	
PUBLIC SCHOOL HALF DAYS NON-DISTANCE LEARNING Dismissal-6pm	

I understand I am responsible for payments on the above checked dates.

Payment Policy

If changes need to be made to my child's schedule to decrease or increase my child's attendance at the Naugatuck YMCA I will give a minimum of 2 weeks notice. I understand I will also be responsible for completing a new tuition agreement form.

Parent Initials



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Care 4 Kids

We encourage families who qualify to apply early for Care 4 Kids which can subsidize the tuition for child care through the state agency. If interested in financial assistance please contact the director for more information. **All families are responsible for half of tuition until approved or denied from Care 4 Kids.**

If you are approved or denied from Care 4 Kids, you can apply for YMCA program financial assistance.

PAYMENTS/PAYMENT INFORMATION

Auto-draft payments are required for all families. If opting out of auto-draft you will need approval from the director and are responsible to make payments on due dates. If you miss the due date your child will not be allowed to attend programming and you are still responsible for the payments.

***If you choose to place a monthly bank draft, please be aware if payment is returned, there may be overdraft charges.

Payment Method/Authorization Agreement

☐ Debit/Withdrawal from Checking/Savings Account

Bank Name: _____

Bank Address: _____

Please show proof of Account and Routing number

☐ Charge Debit or credit Card

☐ Visa ☐ MasterCard ☐ American Exp. ☐ Discover

Name on Card: _____

Billing Address of Card Holder: _____

My signature below states my understanding that I have agreed for the Naugatuck YMCA to draft my credit card account for all fees owed for the summer camp program. I understand that I will be responsible for any and all returned payment fees that are accrued in the event that my selected payment method is not accepted.

SIGNATURE: _____ DATE: _____

Fees are due **monthly** on a prepaid basis. The yearly tuition is based on 180 days of school regardless of absences. The YMCA does participate in the Care4Kids program. Parents are responsible to make all monthly payments until a certificate is issued from Care4Kids and a parent share fee has been determined. **You will NOT receive a monthly bill or payment reminder unless your account is delinquent.**

I have read the policies and procedures of the YMCA Child Care Center and off- site programs which include, but are not limited to tuition, late fees, absenteeism, holidays, vacations, center closings, special events and termination and I understand these regulations and agree to comply.

Parent/Guardian's Signature _____ Date ____/____/____

My signature below states my understanding that I have agreed for the Naugatuck YMCA to draft my credit card account for all fees owed for the summer camp program. I understand that I will be responsible for any and all returned payment fees that are accrued in the event that my selected payment method is not accepted.

SIGNATURE: _____ DATE: _____



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EXCHANGE OF INFORMATION

I, _____, hereby consent to the release of the information initialed and checked below, regarding my child _____ held by the Naugatuck YMCA to _____.

- ____ Educational/Developmental Records
- ____ Diagnostic Assessments/ Evaluations
- ____ Developmental/Health Screenings
- ____ Medical
- ____ Dental
- ____ Immunizations
- ____ Other _____

I authorize communication and exchange of information between the Naugatuck YMCA and _____ to discuss the above indicated records/conditions, and or findings. I also authorize communication and exchange of information between _____ and the Naugatuck YMCA. Further, _____ is authorized to share the information gained with his/her supervisor and staff working directly with him/her. Consent for release of information and authorization of communication shall be for the limited purpose of understanding and addressing my child's needs.

This consent is voluntary and I understand I can withdraw my consent for my child at any time. Unless I withdraw this consent, this authorization will be effective for the period my child is continuously enrolled in the Naugatuck YMCA. By signing below, I am confirming that I have read, understand and agree to the above.

Parent/Guardian (print) _____



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Permission Authorizations

In the following statements of permission, the phrase "my child" refers to the child listed on the application.

I, the undersigned, give permission for my child to participate in normal program activities in and away from the childcare center. I voluntarily agree to hold the YMCA harmless for injuries or accidents resulting in bodily injury or property damage during my child's participation in the YMCA After School Program. I further waive, release, absolve and indemnify the Naugatuck YMCA, its directors, volunteers, officers or employees for injuries or accidents occurring while participating in the programs of the YMCA.

Parent/Guardian's Signature _____ Date ____/____/____

I, the undersigned, give the YMCA permission to take/use photographs, slides, or video of the person named on this application for YMCA purposes. I understand that a photo of my child may be kept in my child's file for identification purposes.

Parent/Guardian's Signature _____ Date ____/____/____

I, the undersigned, certify that the information given to the YMCA is accurate. I realize that I am responsible for updating the YMCA staff of any changes to my child's file. I understand that I must have an updated medical form for my child on file at the Naugatuck YMCA before my child starts the program. I have read and understand the Parent Handbook and have reviewed the Behavior Management Technique and discussed any concerns with staff. Also, I know that **I am responsible to uphold the policies and procedures as stated.**

Parent/Guardian's Signature _____ Date ____/____/____

In the event of a serious illness or injury to my child, he/she will be taken by ambulance to the nearest medical facility, as decided by emergency personnel. I, the undersigned, give the YMCA staff permission to give immediate first aid and/or secure emergency medical services to my child as necessary. Physician Name Address Phone Number.

Parent/Guardian Signature _____ Date ____/____/____

I, the undersigned, give permission to have my child transported by school bus or to and/or from school as needed. This permission includes bus transportation for field trips for any YMCA Child Care program. This permission includes any walking field trip for the YMCA Child Care program. In the unforeseen event of an emergency which would require immediate evacuation of any YMCA Child Care program, permission is granted for transportation to a safe location.

Parent/Guardian's Signature _____ Date ____/____/____

Special Information

Any child with special information in either section needs to have an Individual Care Plan form filled out by the parent/guardian. These forms are available at the Naugatuck YMCA and **MUST** be completed before the child starts the program. Is there any special information concerning your child? (Example: medication, allergies, behavior, pick-up)

Please use this space to provide detailed information regarding behavioral or parental custody issues that would enable us to provide appropriate services to your child. If relevant, please list any behavioral modification methods used at home or at school.

Parent/Guardian's Signature _____ Date ____/____/____

I understand that information regarding my child is generally confidential and may not be given to employees of other schools, public agencies or individual professionals in private practice without my consent or other legal requirement.



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Naugatuck YMCA School Age Program Weather Related Early Dismissal/ Delayed Opening Plan

When Naugatuck schools are dismissed early or the town cancels afterschool activities as a result of inclement weather, the Naugatuck YMCA does NOT offer aftercare. In order to ensure that the children are safe, please indicate the provisions established for your child once he or she is dismissed from school. When Naugatuck schools have a delayed opening, the Naugatuck YMCA does not offer beforecare. These days have been calculated in tuition fees.

Child's Name: _____ Home Address: _____

School: _____

___ My child is to be picked up at school by his/her parent. _____

___ My child is to take his/her bus home. He/she rides on bus number _____

___ My child is a "walker" and will be walking home from school. Once he/she is home, someone will be there for him/her.

___ My child is to go to a friend/relative's house.

He/she is to (Take a bus _____ (indicate bus number), walk, or be picked up at school).

He/she will be in the care of _____.
(Name and phone number of caretaker)

My child(ren)'s arrangements are not described above. He/she is to:



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PARENT INFORMATION- Keep as a reference

GOALS Help children develop to their fullest potential. Support and strengthen the family unit Deliver child care in a safe and positive environment. Teach, model, celebrate, practice, praise, and reinforce the four values of character development: caring, honesty, respect, and responsibility; and confront inconsistencies. Foster health and well-being for children and families.

FORMS NEEDED

Registration form
Medication Administration Form
Asthma Action Plan
Emergency Action Plan
Epi Pen Action Plan
Individual Care Plan
CT Depart. of Ed. Health Assessment Record
Medication in the original box with prescription label

Communication:

YMCA Main Number: 203-729-9622
Western School Text Number: 475-331-7983
Andrew Ave School Text Number: 475-331-7164
SACC Email: YMCASACC@naugatuckymca.org
Remind App for notifications - join the group made by the staff member.

STAFF We have a certified head teacher and a supportive trained staff. We have First Aid and CPR certified staff member on site at all times. Medication Administration and Epi Pen Trained staff are on site when a child is present with the need for care. Staff are trained in Safety Care procedures.

INFORMATION

- Before School Hours: 7am- Start of School After School Hours: School dismissal until 6:00.
- Vacation and Holiday Hours: 7am until 6:00pm
- Delayed School Openings: Before care is closed when there is a delayed opening for the start of school.
- Emergency Half Days: Aftercare is closed on school emergency early dismissal days and school closings for afterschool activities. The school must have a plan for your child if there is an emergency half day. We will not be open.
- The program is closed on the following days: Good Friday, Memorial Day, 4th Of July, Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas Vacation, and New Year's Day.
- Snow Days and Emergency Half Day closings are not made up or adjusted. Please see YMCA website for snow day activities.
- Open for scheduled half days.

Pickup and Dropoff:

Andrew Ave: Drop off and pickup location will be in the back of the building. When facing the building go to the left and go behind the building down the long skinny driveway. There will be a doorbell for you to ring. Staff will come and allow your child in at drop off. At pick up your child will be walked to the door for you and you will sign your child out. (Please always bring ID)

Western School: Drop off and pick up are to the right of the building. Go to the cafeteria door first. If the children are not there they are in the gym. Staff will keep an eye out. At pick up your child will be walked to the door for you and you will sign your child out.

YMCA: Drop off and pick up is at the YMCA building. However on nice weather days we maybe at St Francis Field in the afternoon.

PICK UP POLICY Children must be picked up by an adult. Parents must sign their child out at time of pickup. Please list all people allowed to pick up your child. Please advise them they will need to show ID. IF A PARENT IS NOT ALLOWED TO PICK UP A CHILD, A COURT ORDER MUST BE ATTACHED TO REGISTRATION FORM. Dismissal is at 6:00. A late fee will be charged of \$5 will be charged for every 5 minutes you are late. 2 staff ages 18 or over will be remain with the child. If you are unable to be reached at your contact numbers, we will attempt to call emergency contact people. If the child is not picked up by emergency people or the parents by 7:00, we are mandated by the state of CT to contact the Naugatuck Police Department and DCF.

PAYMENT POLICY Payments are due the last Friday of the month prior to scheduled care. Save your receipts for tax purposes. All accounts must be kept up to date in order to stay active in any of our YMCA programs. Failure to pay will result in a referral to a collection agency. You will be responsible for attorney fees, court costs and any other cost associated with this debt. There is a \$25 return payment fee. We do accept Care 4 Kids. Financial Assistance is available for those who qualify. Families must apply for Care 4 Kids before any other financial assistance is given.



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WITHDRAWALS 2 weeks advanced notice must be given when withdrawing or schedule changing. All families failing to provide this notice will be responsible for 2 weeks payment following the withdrawal. If the program is cancelled due to weather there will not be a refund for the closing.

MEDICATION Prescribed emergency medication will be the only medication administered by the trained staff in our program. All other medication should be dispensed by the school nurse prior to dismissal. A trained staff will be on site at all times when a child who may require medication is in our care. Medication must be in original container with dated current labeling that includes pharmacy and name of prescribing physician. Forms needed are: Written Order from an Authorized Provider/parent's Permission, Emergency Health Care Plan, Asthma Action Plan, Individual Plan of Care and Epi Pen Administration Permission. Emergency medications are stored in the director's office. Controlled medication is stored in a locked box in the director's office. Thorough hand washing is expected. Staff will wear gloves at all times when dispensing or handling medications. If medications are administered, the date, time, dosage and comments will be recorded on the child's individual administration of medication record. The information will be logged into our medical incident log for review by our consulting physician if necessary.

ATTENDANCE:

Text your child's location contact number if he or she will not be at the Y program. (Numbers listed above) Attendance will be done on a daily basis. We will be expecting your child if we do not receive a call saying otherwise. It is important to let your child's school know as well. There is no fee adjustments for missed days.

HEALTH AND ILLNESS If your child becomes ill, parents will be called first. If we are unable to reach a parent we will call emergency contact people. 2 emergency contact people must be listed on your registration form. The child must be picked up within an hour of the call. Sick children will be supervised away from other children and made comfortable while waiting to be picked up. Please keep your sick children home. This will help prevent spread of infection or illness among children. Children should be kept home if they have experienced any of the following within the past 24 hours; a fever of 100 or more, a runny nose with green or yellow discharge, diarrhea, vomiting or nausea, unidentified rash, any contagious disease or condition including but not limited to conjunctivitis, chicken pox, impetigo, lice or severe cough/croup. Please notify the YMCA if your child has developed a contagious disease. If a child develops these symptoms while in after school, we will call the parents or authorized pick up person to take the sick child home.

DISCIPLINE AND BEHAVIOR The YMCA uses positive discipline techniques for guiding children. Staff are training in Safety Care de-escalation strategies. Avoiding competition, comparison and criticism, staff members must deal with children using positive methods of guidance including redirection, anticipation and elimination of potential problems, positive reinforcement and encouragement. Discipline techniques are to be non-punitive and accompanied by rational explanation of expectations. At no time may the staff use corporal punishment or any other humiliating or frightening discipline techniques. The withholding of food may not be used as consequence of behavior at any time. No child shall be restrained. The program operates on the basis of clear and consistent rules, which are explained and understood by the children. Difficult behavior is routinely anticipated, activities are redirected and alternative behaviors are discussed with children. At no time is neglect or abuse of children tolerated. Removal of a child from the group for disciplinary or health reasons will be to a location where at least 2 staff members may maintain visual supervision. Parents can discuss the discipline policy with the staff. The following procedures will take place:

- The child will be given a verbal warning and redirected to another activity.
- If inappropriate behavior continues, the child will be encouraged to talk it out.
- Whenever there is a serious concern about a behavior or discipline problem, the staff will inform the parents. The staff and family will meet to develop plans to resolve the problem and communication on behavior will be offered daily.
- In the event that a recommendation is made for the child to receive an assessment from local health education or mental health services, the parent agrees to provide the results of these assessments to the center. (Any costs relating to these services are the responsibility of the parent.)
- If the above actions have not resulted in improved behavior from the child, written notice will be given to the parent/guardian to remove the child from the program for a determined period of time. During this time period, the YMCA staff will continue to work with the parent/guardian and child on behavior modifications.
- The YMCA reserves the right to remove any child who may pose a danger to themselves or other children in our setting. Efforts will be made to recommend an appropriate placement for the child.



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INJURY AND ACCIDENTS If your child is injured at the after school program and more than first aid is required, 911 will be called first then every effort to contact the child's parent or legal guardian will be made. Emergency transportation will be provided by emergency service vehicles only. Treatment will try to be secured at the hospital of your choice.

SCHEDULE

- BEFORE SCHOOL DAILY SCHEDULE
7am Drop off table activities and gym activities (HEPA)
8:30 Prep for the day
- AFTER SCHOOL DAILY SCHEDULE
3:00 Free choice activities
3:45 Snack
4:00 Gym or outdoor activities
5:15 Homework and quiet activities
- DISTANCE LEARNING
8:55 Drop Off
12:00 Lunch
1:00 Return to School Work
3:25 PickUp

We will follow the public school schedule for half days and no school days.

- VACATION SCHEDULE

7-9am Afterschool room games and activities
10-11:30am Field Activities (or gym depending on weather) (HEPA)
11:30-12:45 Hand washing and lunch (HEPA) in afterschool room
1-1:30 Swim (HEPA)
1:45-2:30 Snack and games afterschool room
2:30-3:45 Gym (HEPA)
3:45-6 Afterschool Dismissal

SNACKS and LUNCHES

Afterschool: A snack is provided daily. The snack consists of two food groups. A snack menu is posted near the parent board. If the snack we provide is not enough for your child, you may send a snack with him/her. Peanuts and nut products are not allowed due to allergies. Snacks must follow our healthy eating guidelines.
Vacation Days and Holidays: Lunches and snacks are not provided. They need to follow our healthy eating guidelines. We do not have access to heating lunches or refrigerating lunches. Peanut butter and nuts are not allowed due to allergies.

Clothing Children should wear comfortable clothing suitable to the season and the activities in the program. Bathing suits and towels should be brought daily along with a full change of clothing for emergencies. Please be sure to label all of your child's belongings with their first and last name. Children are to wear sneakers. Flip flops and sandals are not allowed.

Screen Time Policy Digital devices are to be used for programs that engage children in physical activity, schoolwork or planned activities. No cells are allowed during program hours.

Questions and Concerns Contact Cait Gobstein at 203-729-9622 or cgobstein@naugatuckymca.org

Handbook Sign Off

I _____, parent of _____

understand that the contract between the Naugatuck YMCA can end at any time on either the family or provider's behalf. I/we have read, received and understand all information in the Naugatuck YMCA's handbook. I/we feel comfortable with all the information that I/we have learned and understand that I/we may ask questions at anytime.

Signature

Date



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