

2017-2018 YMCA After School Service Quality Program – Designed for Children

MISSION STATEMENT

The mission of the YMCA is to “put Christian principles into practice through programs that build a healthy spirit, mind, and body for all”.

YMCA CHILD CARE PHILOSOPHY

The YMCA is proud of its history of dedication to youth. Our primary purpose is to provide dependable, safe care in an environment that helps each child develop to his/her fullest potential. The YMCA provides services to all families without regard to race, religion or national origin.

FINANCIAL AID OPPORTUNITIES

The YMCA Financial Aid Program is designed to ensure that YMCA services are accessible to all members of the community and no one is excluded because of inability to pay. It is the policy of the Athens-McMinn Family YMCA to provide services for any youth, adult or senior who desires to participate if funds are available. While participants are expected to pay their share of operation costs, those who need assistance may be awarded full or partial assistance based on their ability to pay, the YMCA’s ability to fund the subsidy or the program capacity. Funds are limited and are awarded to those who are first to apply and meet the standardized qualifications. For financial assistance information, contact the Program Director or the Executive Director. These funds are provided through the kind generosity of YMCA friends and the United Way.

GENERAL POLICIES

1. All children enrolling in After School Care are required to have acquired a physical examination under the direction of a physician prior to admission.
2. The Athens-McMinn Family YMCA requires that the YMCA must keep records on each child enrolled in After School Care. Each child must have a separate record completed and signed by the parent/legal guardian and returned with the registration fee prior to admission.
3. The responsibility is on the parents to keep proper registration information and current phone numbers in the child’s permanent records. Services may be withheld if this information is not provided.
4. **A child will be released only to the persons who are listed on the authorized pick-up section of the enrollment form.** The persons authorized to pick up a child must be 18 years of older. If any parent or authorized individual arriving to pick up a child is observed as being under the influence of drugs or alcohol, the parents or individuals child will be kept on the YMCA property pending notification of properly authorized personnel.
5. Children may not receive personal phone calls at the YMCA except in emergency situations.
6. The parent must complete an *Authorization to Give Medicine* form if a child requires medication while at the program. Medicines must be in original containers. Please give specific instructions. If medication is to continue for more than ten (10) days, a letter from the physician is required along with the form.
7. **Limitations on attendance or required pickup due to illness will be as follows:**
 - a) **Child’s temperature of 100 or higher**
 - b) **Contagious illness**
 - c) **Vomiting**

We adhere to school guidelines: do not bring your child back to our programming if he or she has had a fever or has vomited in the past 24 hours.
8. TN State Law requires reporting of all suspected abuse and neglect to the Department of Human Services.
9. If you decide to withdraw your child from the program, a two-week written notice is required.
10. **Whenever possible, parents should call the YMCA when he/she will be late for pickup. Alternative pickup arrangements should be considered. There is an additional charge for late pickup of \$3.00 for each five (5) minutes. Continued late pickup may result in suspension or termination of services.**
11. **No toys are allowed to be brought. If toys are brought, the Y, and its staff are not responsible for lost or damaged toys.**

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ARRIVAL/DEPARTURE PLAN

1. The YMCA will pickup program participants in one of our following vehicles: a passenger van or eight passenger SUV. Children must meet at designated area. **The Y staff will remain at school for a maximum of 10 minutes after dismissal only.** We cannot return to school if your child does not get on Y transportation.
2. On departure, children are to be signed out by parents, legal guardians, or authorized person. Children must be picked up by a person who is approved before leaving the YMCA.

DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY

A child's participation in the After School Care program depends upon his or her behavior. We certainly want each child to enjoy the activities planned and benefit from their experience with the YMCA. Basic rules of safety and conduct are reviewed. Please make certain that your child is aware of these rules. Parents will be informed by phone, in writing, and/or through parent conference if their child continues to display poor behavior. General discipline techniques involve positive reinforcement for good behavior and careful explanation of behavior that is unacceptable. An activity will be denied for repeated poor behavior and the child will be directed to an alternative activity. Physical discipline will not be used nor will snack be denied as punishment. Counselors are responsible for the care, safety, and well being of each child in their care. Children are to stay with their counselors at all times and are to follow counselor's instructions. This will provide safety for all children and will avoid preventable accidents. It is especially important for children to understand the rules and to understand that all rules are enforced for their own benefit.

Failure to comply with the following simple rules may lead to disciplinary action, possible suspension, and/or termination from the program for:

1. Picking on another child.
2. Engaging in fighting as a way to solve an issue.
3. Stealing or defacing the facilities or other children's property.
4. Refusing to follow basic rules of safety.
5. Disrespect to staff or rude and discourteous behavior toward other children.
6. Repeatedly displaying an inability to follow established guidelines.

Bullying will not be tolerated in our programming. We consider intentional malicious behavior including words and physical contact to be bullying. If we are unable to curb bullying behavior in a quick manner, we will remove your child from our programming to ensure that our environment stays safe for the remainder of our participants.

Athens-McMinn Family YMCA

**Minimum of 4 children at each school stop to maintain program.

<i>REGISTRATION PER CHILD</i>	<i>\$20-MEMBERS</i>	<i>\$30-NON-MEMBERS</i>
	<i>MEMBER</i>	<i>NON-MEMBER</i>
<i>AFTER SCHOOLCARE COST</i>		
School dismissal – 6:00p.m.		
1 CHILD	\$42	\$55
2 CHILDREN	\$62	\$75
3 CHILDREN	\$92	\$105
4 CHILDREN	\$122	\$135

After School Time – school dismissal – 6:00 p.m We will also be open on days school is not in session due to In-service Days, Holidays, and inclement weather days. On inclement weather days, we will pick your children up at their school and bring them to the Y. We are RARELY closed for inclement weather.

*****Payment for services is due on Wednesday the week before services are to be provided. Late fees will be assessed on Friday at the end of business for the YMCA. If payment is not received by Monday of the week services are provided, then we will not be able to serve your family on Tuesday.*****

CHILD INFORMATION SHEET

Name of Child # 1: _____ Goes By: _____

Gender: _____ Age: _____ Birth date: _____ Grade: _____

School: _____ School Phone: _____

Name of Child #2: _____ Goes By: _____

Gender: _____ Age: _____ Birth date: _____ Grade: _____

School: _____ School Phone: _____

Name of Child #3: _____ Goes By: _____

Gender: _____ Age: _____ Birth date: _____ Grade: _____

School: _____ School Phone: _____

Name of Child #4: _____ Goes By: _____

Gender: _____ Age: _____ Birth date: _____ Grade: _____

School: _____ School Phone: _____

Mother's/Legal Guardian Name: _____ Home Phone: _____

Mother's/Legal Guardian Address: _____

Mother's/Legal Guardian Employment: _____ Work Phone: _____

Father's/Legal Guardian Name: _____ Home Phone: _____

Father's/Legal Guardian Address: _____

Father's/Legal Guardian Employment: _____ Work Phone: _____

Parent Cell Phone Numbers: Mother: _____ Father: _____

If parents are divorced, which parent has custody? _____

LIST NAMES AND PHONE NUMBERS OF PEOPLE WHO ARE AUTHORIZED TO PICKUP YOUR CHILD/CHILDREN (OTHER THAN PARENTS) AND WHO CAN BE CONTACTED IN AN EMERGENCY

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

Name: _____ Home Phone: _____ Work Phone: _____

PERSONS NOT AUTHORIZED TO PICKUP OR VISIT YOUR CHILD/CHILDREN: _____

*****Appropriate paperwork such as the divorce decree must be attached if a parent is not allowed to pick up the child/children. (This is annual and the YMCA must be supplied with a copy annually or whenever a change occurs.)**

List any illnesses that affect your child's/childrens activity:

List any physical disabilities that affect your child's/childrens activity:

List any special medications or routines that your child/children requires:

(authorization form is required with each medication/prescription in order for the YMCA to administer.)

PERMISSION SLIPS

I hereby give my permission for the YMCA to take photographs and videos of my child/children and use them in publicity if they so desire. Yes _____ No _____

Parent/Legal Guardian Signature

Date

TRANSPORTATION AUTHORIZATION/RULES

Vehicle Conduct Rules

Children must follow these basic safety rules while being transported. With the first infraction, a parent will be notified and asked to discuss proper behavior with his/her child. With the second infraction, transportation services may be denied for a minimum of two days. Parent will be notified.

1. No fighting, swearing, or abusive behavior.
2. Must remain properly seated.
3. Cannot have any part of his/her body out of vehicle.
4. No eating or drinking on vehicle.
5. May throw nothing out of the window.
6. Potentially dangerous actions will not be tolerated.

My child/children has my permission to be transported by a YMCA vehicle and participate in all YMCA program activities.

I have read and understand the transportation policies.

Parent/Legal Guardian Signature

Date

EMERGENCY MEDICAL AUTHORIZATION

Name of Child/children: _____

Birth date/s: _____

Additional Phone #'s to be reached: _____

The parents/legal guardians authorize the YMCA to obtain immediate medical care and consents to the hospitalization of, the performance of necessary diagnostic test upon, the use of surgery on, and/or the administration of drugs to his/her child/children or ward if an emergency occurs when he/she cannot be located immediately. It is also understood that this agreement covers only those situations which are true emergencies and only when he/she cannot be reached. The parents/legal guardians understand that the provider will make every effort to contact them and/or their designated emergency contacts.

Please complete the following:

1. I/we will be responsible for payment of medical expenses.
2. Medical treatment costs are covered by:

Insurance Co.: _____

Policy #: _____

Child's Physician: _____

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PAYMENT CONTRACT

ACCOUNTING POLICIES

1. The After School Care registration fee for each child is \$20.00 for members and \$30.00 for non-members. It is due upon enrollment, and is **NON-REFUNDABLE**.
2. **PROGRAM FEE: PAYMENT IS DUE WHETHER YOUR CHILD(REN) IS IN ATTENDANCE OR NOT.** Weekly payment is due by Wednesday the week before services are used. A late charge of \$10.00 will be assessed if payment is not received by Friday the week before. If payment is not made by 9:00 p.m. Friday (of week before), your child will **NOT** be picked up for ASC starting on the following Monday and continuing until payment is received in full.
3. **VACATION: Your child is allowed 2 weeks of vacation during the school year (Both Fall and Spring semesters). Please let the front desk staff know in advance of your planned vacation. Fees are still charged for days missed in addition to the two vacation weeks, regardless of whether your child attends the program or not.**
4. **LATE PICK UP FEE:** A late pickup fee of \$3.00 will be charged for the first five (5) minutes after 6:00 p.m., and \$3.00 for each five (5) minute period thereafter.
5. **HOLIDAYS:** A limited number of holidays have been accounted for in establishing fees. Labor Day, Thanksgiving Day and the day after, Christmas Eve and Christmas Day, New Year's Eve and New Year's Day, Good Friday, and Memorial Day. **SINCE WE ARE CLOSED SO FEW HOLIDAYS, THERE WILL NOT BE A REDUCTION IN PROGRAM FEES DURING THE WEEKS THESE DAYS OCCUR. THERE WILL BE HOLIDAYS WHEN SCHOOL IS OUT THAT THE YMCA AFTER SCHOOL SERVICES WILL PROVIDE ALL DAY SERVICE.**
6. **CHECK POLICY:** Make all checks payable to the YMCA. There will be a \$20.00 charge for all returned checks. If two (2) checks are returned, cash or money order will be required for future payments.
7. We will present a receipt at the time of payment.

I/we understand and agree to pay in accordance with the above fee schedule and accounting policies of the Athens-McMinn Family YMCA.

I understand my weekly fee for After School Care is: _____

Parent/Legal Guardian Signature

Date

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PARENTS PERMISSION FOR CHILD TO PARTICIPATE IN THE ATHENS-MCMINN FAMILY YMCA BEFORE/AFTER SCHOOL FUN PROGRAM

RELEASE AND INDEMNITY AGREEMENT

Child's/Childrens Name/s: _____

The undersigned parent(s)/legal guardian(s) of the child/children named above, by the signature(s) below, acknowledge receiving information from the Athens-McMinn Family YMCA After School Fun program for children ages going into kindergarten thru going into 6th grade, including the anticipated program activities.

The undersigned hereby give permission and approval for the named child to participate in the After School Fun program and any and all activities other than _____, during their eligibility.

The undersigned, as parent/legal guardian of the above named child/children represents to the Athens-McMinn Family YMCA that this child does not have any condition which would expose the child/children to any harm or injury by participating in any activities during the program. The parent/legal guardian is aware of risks and hazards incidental to the activities and liability for any injury or harm to the child while participating in the After School Fun program.

In consideration of the child being allowed to participate in the After School Fun program, the parent/legal guardian does hereby forever release, acquit, discharge and covenant to hold harmless the Athens-McMinn Family YMCA, its Board of Directors, employees and volunteers from any and all actions, claims, demands, damages, expenses and compensation, which the parent/legal guardian or child/children may have or claim to have, on account of, or in any way growing out of the child's/childrens participation in any and all of the activities the child may engage in while a participant in the Athens-McMinn Family YMCA After School Fun program.

The undersigned parent/legal guardian further promises and agrees to repay to the Athens-McMinn Family YMCA and any other person or entity released above any sum of money that the Athens-McMinn Family YMCA and any person or entity released above may hereafter be compelled to pay to or on behalf of the child/children because of any accident or injury while the child/children is a participant in the Athens-McMinn Family YMCA After School Fun program.

The undersigned parent/legal guardian understands that the child is not covered by insurance for any injury received while a participant in the Athens-McMinn Family YMCA After School Fun program and the parent/legal guardian will provide insurance for this child/children.

In consideration of gaining membership and/or being allowed to participate in the activities and programs of the Athens-McMinn YMCA ("YMCA") and to use its facilities (whether owned or leased), equipment and machinery, I do hereby waive, release and forever discharge the YMCA and its officers, agents, employees, volunteers, representatives, directors and all others from any and all responsibility or liability for injuries or damages resulting from participation in such activities or programs or my use of such facilities, equipment or machinery, even if such damage or injury results from a negligent act or omission.

I, _____, parent of _____, have

received and read a copy of the Before/After School Services, application, policies, and procedures.

Parent/Legal Guardian Signature

Date