



**FOR YOUTH DEVELOPMENT™
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Dear Parents,

Welcome to the Kerr County YMCA Afterschool Program. Thank you for choosing the Kerr County YMCA to serve as your childcare provider. We are pleased to be able to serve you and your family this year. The Kerr County YMCA is an organization which puts Christian values into practice through programs and activities that encourage the development of healthy spirit, mind, and body for individuals of all religions, races, ages and communities. We are committed to quality and safety, and we strive to ensure that you and your child will have a positive experience this school year.

The YMCA requires all of our counselors to be CPR/First Aid certified, submit to criminal background checks including FBI fingerprinting, and undergo eight hours of pre-service training. I encourage you to take time to get to know the staff who will be working with your child this school year. Strong communication between parents and counselors is an important step we can take together to ensure your child's positive experience and success in our program.

Please take a few moments to read through the attached packet and familiarize yourself, and your child, with our policies and procedures as well as details about payments, daily requirements and the like. You will both gain a better understanding of how the Kerr County YMCA Afterschool Program operates, and be a partner with us for a successful school year experience.

Again, thank you for choosing the Kerr County YMCA Afterschool Program. We look forward to sharing a safe, fun filled school year with you and your child. If you have any questions about the material in this packet, please contact the Kerr County YMCA office at 830.896.8000 and we will be happy to assist you in any way that we can.

Sincerely,

Greg Peschel
CEO



KERR COUNTY YMCA AFTER SCHOOL PROGRAM 2017-2018 ENROLLMENT FORM



Child's Name		Gender M F	Date of Birth	Grade	Child's Home Telephone No.
Child's Home Address			Parent/Guardian Address: (if different from child)		
Parent/Guardian #1 Name	Parent/Guardian Birth date	Parent/Guardian #2 Name	Parent/Guardian Birth date		
Parent/Guardian #1 Place of Employment			Parent/Guardian #2 Place of Employment		
Parent/Guardian #1 Work Phone	Parent/Guardian #1 Cell Phone	Parent/Guardian #2 Work Phone	Parent/Guardian #2 Cell Phone		
Email Address:					
Give the name, address and phone number of person to call in case of an emergency if parents / guardian cannot be reached: Name: _____ Address: _____ Phone #: _____					Relationship
I hereby authorize the childcare operation to allow my child to leave the childcare operation ONLY with the following persons. Please list name & telephone number for each. Children will only be released to a parent or a person designated by the parent/guardian after verification of ID.					
Name:		Name:		Name:	
Phone #:		Phone #:		Phone #:	

CHECK ALL THAT APPLY:	
1. <input type="checkbox"/> TRANSPORTATION	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give – consent for my child to be transported and supervised by the operation's employees. <input type="checkbox"/> for emergency care <input type="checkbox"/> on field trips
2. <input type="checkbox"/> FIELD TRIPS:	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give – my consent for my child to participate in Field Trips:
3. <input type="checkbox"/> PUBLICITY RELEASE	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give – my consent for photographs and videos to be made of my child and used solely for publicity and training purposes by Kerr County YMCA.
4. <input type="checkbox"/> RECEIPT OF WRITTEN OPERATIONAL POLICIES:	I acknowledge receipt of and agree to abide by the facility's operational policies including those for discipline and guidance. I hereby release the Kerr County YMCA, its officers, and representatives of all liabilities arising out of this activity.

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:		
In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:		
Name of Physician:	Address:	Ph.#:
Name of Emergency Medical Care Facility:	Address:	Ph.#:
I give consent for the facility to secure any and all necessary emergency medical care for my child. X		
_____ Signature - Parent or Legal Guardian		

List any special problems that your child may have, such as allergies, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregiver's should be aware of:

SCHOOL AGE CHILDREN: My Child Attends:

√	NAME OF SCHOOL	SCHOOL ADDRESS	SCHOOL PHONE #
	Nimitz Elementary KISD	100 Valleyview Dr., Kerrville. TX 78028	(830) 257-2209
	Starkey Elementary KISD	1030 W. Main, Kerrville, TX 78028	(830) 257-2210
	Tally Elementary KISD	1840 Goat Creek Rd, Kerrville, TX 78028	(830) 257-2222
	Tom Daniels Elementary KISD	2002 Singing Wind Drive, Kerrville, TX 78028	(830) 257-2208
	BT Wilson KISD	605 Tivy Street Kerrville, TX 78028	(830) 257-2207

My child's immunization record is on file at the school and all required immunizations and/or tuberculosis test are current. Vision and Hearing screening records are also on file.	Days child will be in care: (Circle One) 5 days 3 days Drop In	Start Date
	Hours of Operation: YSA KISD 3:00-5:30, Day Camp 7:30-5:30	

X

Parent Signature

X

Date

Kerr County YMCA
Child Care/ Day Camp
Code of Conduct

Child's Name _____ School/Site _____

1. Check in to Y School Age immediately after school each day.
2. Keep my personal belongings in the storage container during Y School Age.

Note to Parents

Children are responsible for their own personal belongings, which are stored at the start of Y School Age each day. Staff members will encourage the children to keep up with their personal belongings, but staff will not be held accountable for lost articles.

3. Remain seated and quiet during roll call and announcements. Answer only for myself.
4. Follow all Y School Age rules during self-directed play, snack time, activity time, and emergency drills.
5. Follow all instructions given by the Y School Age staff.
6. Tell the Y School Age staff if I am sick or hurt.
7. Follow the Time Out instructions of the Y School Age staff.

Time Out

A supervised place will be designated as a Time Out where children may be removed from participating in activities for a short period of time, to regroup their thoughts or actions before returning to regular activities.

8. Respect all other children and the Y School Age staff at all times.
9. Respect all Y School Age and school supplies, equipment, and property.
10. Respect all the personal belongings of the other children.
11. Help in cleaning up after myself in all activities.
12. Children will be expected to stay within the boundaries and specific areas (designated areas under adult supervision) according to the program and schedule set up by the center's staff.

Note to Parents:

For the safety of your child, the parent and police will be notified immediately if your child leaves the indoor or outdoor boundaries set by the staff.

Definition: A disciplinary problem is defined as one in which a child is hampering the smooth flow of the program by either requiring constant one-on-one attention; is inflicting physical or emotional harm on other children; is physically and/or verbally abusing staff or is otherwise unable to conform to the rules and guidelines of the program, unless any of the above behavior is due to a physical or mental disability.

Child's Name

Date

Parent/ Guardian Signature

Date

Staff Signature

Date

Notice of Playground Licensing Requirements

The Texas Department of Family & Protective Services (TDFPS) has visited the:

- Nimitz Elementary School
- Starkey Elementary School
- Tally Elementary School
- Tom Daniels Elementary School
- BT Wilson

playgrounds on routine site inspections. The licensing standards state that some of the playground equipment that your child plays on at the Elementary School does not meet TDFPS minimum standards requirements. The Kerr County YMCA after school program feels that this playground equipment is safe for elementary children with proper supervision. The TDFPS will allow us to continue to play on the equipment with your permission.

My Child _____ has my permission to play on the playground equipment at the Elementary campus that my child attends as indicated on the enrollment form and any campus which my child may attend for Holiday or Day Camps.

Parent Signature

Date

Kerr County YMCA After School Program
 BT WILSON
 Fee Schedule 2017-2018

Month	Payment Due Date	Part Time Rate/1-3 days	Part Time Rate/1-3 days
August	August 28, 2017	\$20.00	\$20.00
September	September 5, 2017	\$100.00	\$75.00
October	October 3, 2017	\$100.00	\$75.00
November	November 3, 2017	\$100.00	\$75.00
December	December 5, 2017	\$75.00	\$50.00
January	January 3, 2018	\$100.00	\$75.00
February	February 5, 2018	\$100.00	\$75.00
March	March 5, 2018	\$75.00	\$50.00
April	April 3, 2018	\$100.00	\$75.00
May	May 3, 2018	\$100.00	\$75.00

A \$50.00 registration fee per family is required to enroll your child(ren) in the After School Program.

To receive the KISD employee discount, a valid school ID must be presented. KISD employees are required to pay the \$50 registration fee per family.

Payment must be made by the due date to keep your child enrolled in the program.

On all payments, please include the following: **Child's name and school name.**

Check and Money Order payments may be made at the YSA site or the YMCA office. ALL CASH payments must be made at the YMCA office at 1609 Sidney Baker. Credit/Debit Card payments may be made online (www.kerrYMCA.org) or by phone.

No credits will be given for absences, sick, or daily cancellations.

If you have any questions or need to make other payment arrangements, please contact the YMCA School Age Director at 896-8000.

LATE PICK-UP FEE: \$10.00 Per child from 5:35-5:45 pm
\$1.00 per minute after 5:45 pm
Fees will be collected at time of pick-up.

Parent Signature

Kerr County YMCA

Child Care/ Day Camp

Code of Conduct

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***An extra copy of this policy is provided for your records. Review these policies with your child prior to his/her attendance.**

COPY
for Parent/Guardian

Kerr County YMCA After School Program
BT WILSON
Fee Schedule 2017-2018

Month	Payment Due Date	Monthly Rate Rate/5 days	Part Time Rate/1-3 days
August	August 28, 2017	\$20.00	\$20.00
September	September 5, 2017	\$100.00	\$75.00
October	October 3, 2017	\$100.00	\$75.00
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<p>COPY for Parent/Guardian</p>



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KERR COUNTY YMCA

HOURS, DAYS, AND MONTHS OF OPERATION 2017-2018

AFTER SCHOOL CARE

Kerr County YMCA School Age Program is open Monday through Friday starting August 28, 2017 through May 31, 2018. We provide care from the time students are released from school until 5:30 pm (with the exception of school holidays).

DAY CAMP

We will be **OPEN** all day the following days. Please be advised that additional fees will apply for Day Camps.

Winter Camp

Open December 27, 28, 29, 2017- January 2-5, 2018

Spring Break Camp

Open March 12-16, 2017

AFTER SCHOOL CARE AND DAY CAMP will NOT be provided on the following days:

September 4th

October 9th

November 23rd & 24th

December 25th & 26th

January 1st

February 19th

March 30th

May 28th

Bad Weather Make Up Days: (if school is in session, we will provide After School Care)

KISD: February 19th and March 30th

(Other bad weather make up days are on regularly scheduled Holidays and therefore After School Care will not be provided due to staffing availability.)