



Summer Day Camp Current Client Registration Form

This form is for current clients where applicant is registered in one of our Before & After School Programs. Registration can only be taken at our Main Office at 376 Poplar Ave. between the hours of 7:30a.m. & 5:30p.m. YMCA of Timmins staff at our Before & After School locations are not permitted to take these forms for you. Deposit must be paid with this registration.

Child's information

Last name:

First name:

Birth date (y/m/d):

Gender: male female

Grade:

I _____ (parent/guardian name) confirm that nothing has changed on my child's Before/After School Registration form. My emergency contacts and contact information have remained the same.

Parent/Guardian Signature: _____

Lunch/Snacks

I understand that I am to provide my child with water, snacks and a lunch daily. Lunches must not contain nut products. If there are any other food allergies in your child's group you will be notified by letter.

Parent/Guardian initials: _____

Sign In and Out Procedure

I understand that the YMCA is not responsible for my child until they arrive (signed-in) at the YMCA program or after they leave (signed-out). For the safety of your child(ren), parents and/or guardians must approach a YMCA staff when dropping-off and picking-up your child(ren).

Should your child walk alone to or from our program an **Authority and Release Consent** form must be completed with all relevant information signed (available at the main office).

Parent/Guardian initials: _____

Program Support

Has your child been diagnosed with special needs or behavioural needs? (ie. ADD/ADHD)

Yes No

Please specify

Does your child receive additional support in school?

Yes No

Does your child require one-on-one support?

Yes No

Additional Information

Is there any additional information that the staff should be informed of to better care for your child? Please attach.

Activities on Property

I hereby give consent for my child to use all play equipment and to actively participate in all activities associated with the child care program.

Parent/Guardian initials: _____

Off Site (Neighbourhood Walks)

I hereby give consent for my child to actively participate in all activities involving walks within the community. In the case of special field trips parents will receive a consent form to be signed before the day of the field trip. This consent form must be signed in order for children to participate in the field trip.

Parent/Guardian initials: _____

Health and Wellness

If your child shows symptoms of ill health such as fever, vomiting or diarrhea, your child will not be admitted to our care. In the case of discharge from the eyes or ears and rashes deemed suspicious, a physician's note may be required stating the nature of the illness. If your child develops symptoms of ill health while in our care, you will be contacted to pick up your child. **Children must be free of diarrhea, vomiting or high fever as a result of illness for twenty-four consecutive hours before returning to child care.**

Parent/Guardian initials: _____

Head Lice

Throughout the summer, spot checks will be conducted on all children. If a child has either nits or lice, contact will be made to immediately have the child picked up. The child must then be treated and **all** nits must be removed prior to re-admittance to the program. Your support and cooperation is greatly appreciated in this matter.

Emergency Medical Consent

I hereby grant permission for the Staff to take whatever steps may be necessary to obtain medical care to my child if warranted. These steps may include, but are not limited to the following: call 911, attempt to contact parent/guardian, and attempt to contact the parent/guardian through any of the people listed as emergency contacts.

Parent/Guardian initials: _____

Swimming

Does your child know how to swim?

Yes No

Does your child require a life jacket?

Yes No

Sunscreen Policies and Procedures

1. All children and staff will wear sunscreen daily with an SPF of at least 15 on all exposed skin.
2. Parents or legal guardians will be responsible for applying the first layer of sunscreen prior to morning drop off.
3. Parents or legal guardians will be responsible for providing their child/children with enough sunscreen (in a sealed container) to take with them for later applications. One container per child, please.
4. Staff will be responsible for ensuring thorough follow-up applications after one hour in water, two hours of activity in the sun, and/or any other time as needed. Please note children in JK, SK, Grade 1 and Grade 2 will have the sunscreen applied to them by the day camp staff. Children in grades 3, 4, and 5 will apply their own sunscreen supervised by staff. Staff will remind these children to apply sunscreen throughout the day.
5. For children who have fair skin, freckles, or numerous moles; have blonde, red or light brown hair; have a family history of skin cancer, we recommend an extra t-shirt be brought to wear in the water for extra protection.
6. A sunscreen station will be set up on all field trips. Children can come to this station when they need sunscreen reapplied.
7. The YMCA reserves the right to disallow anyone to participate in the program at any time for failure to comply with this policy. If a child refuses to apply sunscreen please inform the Supervisor immediately.
8. Please note that these decisions were made to protect children and staff from the dangers of ultraviolet rays. Our staff members have been trained on this subject and understand their responsibilities and the consequences for failure in observing this policy.

I have read and understood the YMCA Sunscreen Policy.

Parent/Guardian Initials: _____

Sunscreen Application

I grant permission to the YMCA of Timmins staff to apply sunscreen on my child as required.

Yes No

Parent / Guardian Initials: _____

YMCA Code of Conduct

It is our goal to provide a healthy, safe and secure environment for all participants. As a fully integrated program, the YMCA values diversity and the differences that form the child care community. Staff use a positive, values based approach to guide appropriate behaviors and seek to reward and reinforce positive behavior. Children are expected to follow YMCA behavior guidelines and to interact appropriately with their fellow children.

The safety of each individual is of the utmost importance to the YMCA. Parent/guardian(s) and children must recognize a personal responsibility to learn and follow safety and other rules established by the YMCA. Behavior that impacts other children physically or emotionally (including harassment and/or bullying) may result in immediate dismissal or removal from the program. Children can be dismissed from care due to intentional behavior that places them or others at risk. Children are expected to follow YMCA behavior guidelines and to interact appropriately with other children.

Behavior Guidelines:

- All children are responsible for their actions
- All children will respect each other and the environment
- All children will be honest and true to their word
- All children will care for themselves and those around them
- All children will make healthy and safe choices
- All children will value diversity and seek to include others

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

1. The staff will document the situation. This written document will include what the behavior problem is, what provoked the problem and the corrective action taken.
2. If the problem occurs a second time, staff will schedule a conference that will include the parent, camper, the Community Program Co-ordinator and the General Manager.
3. If a problem is ongoing and the child continues to disrupt the program, the YMCA of Timmins reserves the right to suspend the child from the program. Expulsion from the program will be considered in situations that threaten the immediate safety of that child, other children or staff. The parent may be notified and expected to pick up the child immediately.

I have read and understood the YMCA Code of Conduct and behavior guidelines.

Parent/Guardian Signature: _____

Dates Required – Please note you will receive a Payment Schedule upon registration

WEEK	DATES	DAYS REQUIRED (CHECK ALL THAT APPLY)				
1	July 3 rd – July 7 th	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
2	July 10 th – July 14 th	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
3	July 17 th – July 21 st	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
4	July 24 th – July 28 nd	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
5	July 31 st – August 4 th	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
6	August 8 th – August 11 th		<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
7	August 14 th – August 18 th	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
8	August 21 st – August 25 th	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri
9	August 28 th – September 1 st	<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri

OFFICE USE ONLY

Early Bird Registration?	Deposit Amount	Receipt Number
<input type="checkbox"/> YES <input type="checkbox"/> NO		

Are you subsidized?

Yes No I have applied for subsidy. My appointment date is _____.

If yes, do you have a parental contribution?

Yes No

If yes, how much?

PAYMENT POLICY AGREEMENT

DEPOSIT POLICY

ALL REGISTRATIONS REQUIRE A **\$50 NON-REFUNDABLE** DEPOSIT PER CHILD. DEPOSIT WILL BE PUT TOWARDS FIRST WEEK OF CAMP.

Refund Policy

Cancellation must be made in **WRITING FOUR WEEKS IN ADVANCE** to the YMCA Administration office. The finance department must receive all cancellations in writing; otherwise, refunds will not be issued. Refunds are not applicable for absent days or for circumstances out of the control of the YMCA, such as, weather conditions, power outages, etc...

Authorization

I hereby declare the information contained in this package is accurate, and will inform the Supervisor of any changes to information which may arise. I have reviewed the enclosed policies and procedures and agree to abide by them.

Child's Name: _____

Parent/Guardian:

Print Name: _____

Signature: _____

Staff Witness Signature: _____

Date: _____

Method of Payments Options

Summer payments are due two weeks prior to each week of camp. A payment schedule will be sent to you.

The following payment methods are accepted:

Preauthorized Credit Card, Debit, Credit Card, Cash, Cheque.

For your credit card security please **DO NOT** email us your credit card number.

Preauthorized Credit Card: Visa _____ (initial here) Master Card _____ (initial here)

Account Number: _____ Expiry Date: _____

Name as it appears on card: _____

Please make all cheques payable to The Timmins Family YMCA

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Timmins Ontario
P4N 4S4

Phone: (705) 360-4381

Fax: (705) 360-4382

www.timminsymca.org