



# North Decatur Elementary 26-27 Before and Afterschool General Registration Form

Registration Date \_\_\_\_\_ Child's Name \_\_\_\_\_  
 Male/Female \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Grade in school \_\_\_\_\_

YMCA Member (YM) \_\_\_\_\_ Program Member (PM) \_\_\_\_\_

	Grades K-6th	
Afterschool	\$55 YM	\$65 PM
Before school	\$45 YM	\$55 PM
	Preschool	
Afterschool	\$20 YM	\$25PM
Before School	\$30YM	\$35PM
Drop in rate- \$15 daily		
The first payment is due July 29th		

**Please circle the option that best fits your needs:**

**Before School only** 6:30am-7:45am  
**Afterschool only** 2:50pm-5:30pm  
**Both** 1:50pm- 5:30pm on Early Release

Financial assistance is available for those who qualify; this includes our scholarships from the Y,

Street Address \_\_\_\_\_ City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian's Name (Please Print) \_\_\_\_\_ Primary Phone \_\_\_\_\_ Occupation \_\_\_\_\_ Email \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent/Guardian's Name (Please Print) \_\_\_\_\_ Primary Phone \_\_\_\_\_ Occupation \_\_\_\_\_ Email \_\_\_\_\_ Work Phone \_\_\_\_\_

If Parent/Guardian's address is not the same as above, please list it here.

Does this child have any allergies or conditions that our staff should be aware of? Yes/No  
 If yes, please explain: \_\_\_\_\_

Will the YMCA need to give this child daily medication while they are in our program? Yes/No  
 \*If yes, please request a Medicine Form from the Director of Childcare @kmccclary@dscymca.org

I hereby certify that my child, \_\_\_\_\_ is physically capable of participating in the Before and After-school Program at the North Decatur Elementary. I realize that participating in the Before and Afterschool Program involves vigorous activities such as, but not limited to, jumping, running and rapid directional change. I further assert my understanding of certain inherent risks involved in my child participating in such activities and regardless of the precautions taken by the YMCA or the participants, I realize that some injuries may occur. I release and hold the Decatur County Family YMCA and North Decatur Elementary blameless from any liability for physical or other injury or harm suffered by my child during or as a consequence of his/her participation in the YMCA Afterschool Program. I hereby agree that the Decatur County Family YMCA staff, volunteers and North Decatur Elementary are released from liability in connection with medical treatment and unavoidable accidents. The Decatur County Family YMCA/ North Decatur Elementary also has my permission to use necessary medical measures in the event of an emergency and this medical treatment will be the responsibility of the child's legal guardian/parent.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We accept children (grades PreK-6th)  
 All children are accepted without regard for race, religion, gender, national origin, or the presence of any sensory, mental, or physical challenges.

Enrollment requirements include: this registration form, signed handbook page, a signed photo/video release form, immunization records, a filled out Enrollment form, a signed app info and the first week's payment, and a medication form if necessary. All of these requirements, excluding this page, can be found on the app or paper copies are available upon request.\*

\*If these requirements are not met, you're child may not be allowed into the program.

Please circle the individual day camps on days off of school and/or snow days that your child **will** attend:  
 \*Fall, Winter and Spring Break will require their own registration forms\*  
 Wed. Nov. 25th      Mon. Jan 18 (MLK Day)      Mon Feb 15th (President's Day)  
 Fri March 26th (Good Friday)      Mon. March 29th (Easter Monday)      Fri. April 30th (Spring Day)  
 All Snow Days that aren't in level red travel status  
 Please note, on the following dates one or both schools are off but there **will NOT** be an option for day camp:  
 Mon Sept 7th (Labor Day)