Franklin County Family YMCA

2015-2016 OUT OF SCHOOL FUN CLUB PARTICIPATION FORM

This form must be completed EACH TIME a child attends the YMCA Fun Club. All participants must complete the Fun Club Registration form when registering the first time for the 2015-2016 school year.

PRINT legibly the name of child attending YMCA Fun Club.

_____ _____ _____ _____

Last Name | Given First Name | GOES BY NAME | Grade currently enrolled in

Name of Legal Guardian(s) _____ Best Day Time Phone#_____

MEDICATION: ____ NO, meds are not needed.
____ YES, my child will need medication. A Medication Authorization Form is attached and meds will be given to Y staff.

ALLIERGIES: (Y/N) _____ Please list allergies_____

PAYMENT PROCEDURE

- **Multiple sessions may be selected (below.) Payment for all session(s) selected must be attached.**
- **Payment deadline is two days prior to the day of care. Drop-Ins pay an additional $5.00 fee (per family.)**
- **Please check (below) each day attending**

SCHEDULED FUN CLUB

October Fun Club: ☐ Monday, 10/12 **November Fun Club** ☐ Tuesday, 11/3 **Thanksgiving Fun Club** ☐ Wednesday, 11/25

Holiday Fun Club: ☐ Monday, 12/21 ☐ Tuesday, 12/22 ☐ Wednesday, 12/23 ☐ Monday, 12/28 ☐ Tuesday, 12/29 ☐ Wednesday, 12//30 ☐ Thursday, 12/31 6:00 a.m.—3:00 p.m.

January Fun Club ☐ Monday,1/4 ☐ Tuesday, 1/5 ☐ Monday, 1/18
MarchFun Club ☐ Monday, 3/14 ☐ Monday, 3/28 ☐ Tuesday, 3/29 ☐ Wednesday, 3/30 ☐ Thursday, 3/31
April Fun Club ☐ Friday, 4/1
May Fun Club ☐ Thursday, 5/26 ☐ Friday, 5/27 Field Trips will be on some Friday's. Please see Fun Club Flyer for more information.

UNSCHEDULED FUN CLUB

Out of School Fun Club ☐_____(Day & Date)

- I understand that this Fun Club Participation form must be submitted with payment each time my child registers for Y Out-of-School Fun Club and that **my child IS NOT registered** until this form and payment are received by the Y and availability of space is confirmed by Y staff.
- I understand and agree that I am fully responsible for reading the SAFE Parent Handbook and any other information distributed to parents and will comply with all policies.
- I understand that this form allows my child to go on all scheduled outings with Franklin County YMCA Fun Club staff.
- Attached is payment which includes:

$ _____ **Registration Fee** ☐ $0 for current SAFE participants ☐ $25.00 (Non SAFE—Payable once per year for oldest child, 2nd child - $10)

$ _____ **Session Fee** ☐ Scheduled Fun Club—$23 ☐ Un-scheduled Fun Club—$23, or $12 SAFE (if day has been paid)

$_____ **Additional Fee** ☐ $5.00 Drop-in fee (per family) ☐ Field trip fee $10

$_____ **TOTAL PAYMENT ATTACHED** ☐ E-Wallet ☐ cash ☐ check #_____ ☐ credit/debit card

(Staff will not accept Fun Club Participation Forms without full payment and completed Fun Club RegistrationForm)

Guardian Signature _____

YMCA STAFF: Staff is responsibe for verifying the following BEFORE parent leaves front desk.

_____ **ALL of the above has been completed and signed.**

_____ **I have given Parent Pick Up Authorization Cards.**

Date Received _____ Staff Name _____