



2016 HOLIDAY CHILD CARE

Cost for Child Care per Day per Child

Members: \$ 10.00

Nonmembers: \$ 15.00

Ages 3-12

7:00AM to 5:30 PM

Childcare will be held at the YMCA

Please complete all information for Registration and circle days that your child will be attending holiday child care.

Child's Name: _____ Age: _____

Mother's Name: _____ Cell: _____

Father's Name: _____ Cell: _____

Address: _____

Emergency Contact: _____ Cell: _____

Please Circle the Days your child will be attending

November: 21 22 23

December: 19 20 21 22 23 27 28 29 30

January: 2 3

We will provide your child with a nutritious Morning and afternoon Snack

Please pack your child a lunch

I certify that this child is in normal health and capable of participating in the YMCA youth activities. I do acknowledge the risk of injury is possible. I grant permission for my child to play and in doing so I hereby release any and all rights and claims for injuries and damages I may have against the YMCA their board, Managers, employees, volunteers. If medical attention is required, I give my permission for such medical care when either I or the emergency contact person cannot be notified. I understand that the YMCA does not carry accident insurance on program participants.

Parent/Guardian Signature _____ Print Name _____