



# 2017-2018 Child Care SACC

Child Care in Erlanger/Elsmere District  
Locations: Arnett, Howell, Lindeman, Miles

We are so excited that you are interested in After School Child Care services through the YMCA! Families can customize the program that works for them. Our Erlanger/Elsmere programs are in the unique position that students attend part of the year through our **School Age Child Care (SACC) program** and the other part through our grant based **21<sup>st</sup> Century Community Learning Center (21 CCLC) program**.

**SACC Program runs August 17 – August 31**  
**21<sup>st</sup> CCLC programs run September 5 – May 10**  
**SACC Program runs May 14 – Last Day of School**

*Students registered in the SACC program will automatically be invited to register for the 21<sup>st</sup> CCLC program.*

## REGISTERING FOR SCHOOL AGE CHILD CARE (SACC):

- ☺ **HOLD A SPOT FOR YOUR CHILD IN THE SACC PROGRAM!** Families may reserve a spot for their child by submitting a: ① *Registration Packet* with registration fee ② KY Immunization Certificate.
  
- ☺ **CUSTOMIZE YOUR SACC SERVICES!**
  - Full Time: 4 to 5 days.
  - Part Time: 1 to 3 days.
  - After School SACC: End of school–6:00 p.m.
  - Friday SACC Add-On Services during 21<sup>st</sup> CCLC
  
- ☺ **CONVENIENT WEEKLY BILLING FOR SACC PROGRAM!**
  - Charged the Friday before the week attending.
  - Tuition is charged to a credit/debit card on file.
  - Full payment is due, even if students do not attend the program due to absences, vacations, etc.
  - Contact the billing department to discuss special payment arrangements.
    - If not paying by credit/debit card, only money orders and checks will be accepted. NO CASH!
  
- ☺ **CONVENIENT WEEKLY BILLING FOR SACC PROGRAM!**
  - Charged the Friday before the week attending.
  - Tuition is charged to a credit/debit card on file.
  
- ☺ **FRIDAY ADD-ON SACC SERVICES AVAILABLE DURING 21<sup>st</sup> CENTURY PROGRAMMING!**
  - 21<sup>st</sup> Century Programming meets only Monday – Thursday. For families needing child care on Fridays, there is a purchase SACC Add-On option!
  - Friday Add-On purchase option is \$10 per week, per child. Charged Friday before week attending.
  
- ☺ **DINNER PROGRAM INCLUDED!**
  
- ☺ **STATE CHILD CARE ASSISTANCE AND YMCA SCHOLARSHIPS AVAILABLE TO HELP ELIGIBLE FAMILIES!**
  - Registration fees are not waived with State or Scholarship Assistance.
  - Apply early for State Child Care Assistance and YMCA Scholarship Assistance – funds are limited.
  - Commonwealth of Kentucky’s Child Care Assistance: Contact 1-800-809-7076.

### **SACC Registration Fee**

**\$15 per child or \$25 per family**

***All fees are due upon registration.  
Fees are non-refundable and non-transferrable.***

*The Registration fee is a one-time annual charge.  
If attending the fall and spring sessions of the  
SACC program – pay the registration fee only once!*

☺ **STAY IN THE KNOW WITH REMIND TEXT ALERTS, FACEBOOK, AND A MONTHLY NEWSLETTER!**

☺ **WE OFFER SDO (SCHOOL DAY'S OUT) AND SNOW DAY PROGRAMS AT OUR ARNETT LOCATION THROUGHOUT THE SCHOOL YEAR!**

- Registration and payment required in advance.
- Open to all students - if space is available.



## SCHOOL DAYS OUT

**SACC & 21<sup>st</sup> CCLC** families must purchase the SDO program if Erlanger/Elsmere Schools are closed for the day.

### SDO DAILY PROGRAM FEES

**SACC & 21<sup>st</sup> CCLC Participants:**  
\$25 per day, per child

**Non-Program Participants:**  
\$35 per day, per child

## SNOW DAY

**SACC & 21<sup>st</sup> CCLC** families must purchase the Snow Day program if Erlanger/Elsmere Schools are closed for the day.

### SNOW DAY PROGRAM FEES

#### **Snow Day Insurance**

\$15 one-time fee, per child

- \* Insurance guarantees a spot for your child. Plus, you only have to fill out registration paperwork once!

#### **Daily Snow Day Rate (Per Day/Per Child)**

**SACC & 21<sup>st</sup> CCLC Participants:**  
\$25 per day, per child

**Non-Program Participants:** \$35

- \* **Even if Snow Day Insurance is purchased, families must also pay the daily Snow Day rate for each day used.**

**EXERCISE  
LEARN & PLAY  
AFTER THE  
SCHOOL DAY**



☺ **YOU HAVE QUESTIONS? WE HAVE ANSWERS!** We're here to help!

- |  |                     |              |
|--|---------------------|--------------|
| ○ Arnett: Lesa McAllister, Site Director               | lmcallister@myy.org | 513-748-3420 |
| ○ Howell: Dale Logue, Site Director                    | dlogue@myy.org      | 513-426-5539 |
| ○ Lindeman: Nathaniel Cheeks, Site Director            | ncheeks@myy.org     | 513-426-5529 |
| ○ Miles: Sara Jennings, Site Director                  | sjennings@myy.org   | 513-748-3359 |
| ○ Rebecca Nooe, Senior Program Director of Family Life | rnooe@myy.org       | 859-334-6502 |
| ○ Beth Texley, Billing Department                      | etexley@myy.org     | 859-334-6513 |

**Note:** The above phone numbers for our Site Directors and are only accessible during school hours/school year. Contact Rebecca Nooe, Senior Program Director of Family Life when school is not in session.

The *Child Care Handbook* will be made available at the end of July - closer to the start of the 2017 - 2018 school year. It will include detailed program information and will be a valuable resource for parents. Once available, it can be accessed online through the [www.myy.org](http://www.myy.org) website or can be made available upon request.



**Automatic Credit/Debit Card Payment (Mandatory)**

Families must pay for registration fees, deposits, and weekly/monthly fees associated with Camp or Child Care automatically through a credit or debit card. Please fill out the payment information below.

Once this information has been entered into our system, this form will be shredded. Questions or concerns can be directed to Beth Texley, Billing Department at: [etexley@myy.org](mailto:etexley@myy.org) or by calling billing at 859-334-6513.

Parent Name			
Child(ren) Name(s) <small>Print ALL children's names that payments should be applied to!</small>			
Type of Card	<input type="checkbox"/> Visa	<input type="checkbox"/> Master Card	<input type="checkbox"/> American Express
Card Account #			
Expiration Date (MM/YY)		CSC Code <small>(Credit Verification Code found on back of card)</small>	
Name on Card			
Billing Address <small>(Include City, State, Zip)</small>			
Signature			

**NEVER send your credit/debit card information over a fax or email!**

If you are sending your child's Camp or Child Care Registration Packet electronically, fill out the information above with the exception of your card account number and CSC Code. You will then need to call the Billing Department to verbally provide this information.

Your child's registration will not be entered into the system/or your child's space put on hold until your payment information and Registration packet has been secured!

**Beth Texley, Billing Department  
859-334-6513**



# 2017-2018 CHILD CARE REGISTRATION PACKET ERLANGER/ELSMERE SACC

Registration is a quick method of reserving a space for your child. **To register, parents will need to complete this packet in its entirety and pay the registration fee.** Families registering more than one child will need to fill out a separate *Registration Packet* for **each** student.

Today's Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Effective Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*This is the date your child is officially registered to start the program and fees will begin to be applied! EE schools start date for this year is August 17, 2017.*

Student Information			
Name			
Nickname (if applicable)			
Street Address			
City/State/Zip			
Gender (Circle)	Male   Female	D.O.B.	
Age		Grade	
School Attending			

Parent/Guardian Information		
Name		
D.O.B.		
Street Address		
City/State/Zip		
Phone (Home)		Place a ★ next to the best number to call while your child is in the program.
Phone (Cell)		
Phone (Work)		
Email Address		

Immunization Records	
A copy of your child's KY Immunization Certificate must be received prior to the start of the SACC Program. If the document expires during your child's enrollment in the program, you will be responsible for providing a new one.	
<input type="checkbox"/>	My child's immunization record is attached or will be turned in prior to their start of the program.
<input type="checkbox"/>	My child was/is in the <b>CHILD CARE</b> program.

### Registration Fees

**Registration: \$15 per child or \$25 per family**  
Non-refundable/Non-transferable/Due at the time of registration

### Tuition Rates

Tuition is charged to a credit/debit card on file.  
*Erlanger/Elsmere Child Care is billed weekly.*  
*Charged the Friday prior to the week attending.*

**Family Discount:** Additional siblings save 10% each!



**MANDATORY United Way Reporting:** To help us in our required reporting due to funding, we request the following information. This information is for United Way reporting purposes ONLY! It will be kept confidential.

Total number of people in your household? \_\_\_\_\_ Do you live in the City of Cincinnati limits?  Yes  No

Participant's Race:  White/Caucasian    Black/African-American    American Indian    Hispanic  
(Check only one)    Multi-Racial    Native Hawaiian/Pacific Islander    Asian    Other

Household Income:  Less than \$20,000    \$20,000 - \$30,000    \$30,000 - \$40,000    \$40,000 - \$50,000    \$50,000 +

### Parent Acknowledgements:

- Ⓢ All registration fees are due at the time of registration. A valid credit/debit card must be on file for all Child Care payments. I further understand that my credit/debit card information is documented and submitted on a separate form. By signing below I give my permission for the Y to charge my credit/debit card I provided for SACC fees.
- Ⓢ My credit/debit card will be charged in full the Friday before the week my child attends for the program I have selected on this registration form or according to special arrangements I have documented with the Billing Department. All registration fees are non-refundable and non-transferable.
- Ⓢ I will be charged in full (whether or not my child attends) unless I withdraw my child from a selected program using the *Change of Program Form* and return it no later than two weeks in advance of my child's last day. No verbal or over the phone withdraws are accepted. (Keep a duplicate copy of the form as a receipt.)
- Ⓢ All *Registration paperwork* must be completed in full, including submitting current KY Immunization Certificate, before my child can attend the SACC program.

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



Student's Name: \_\_\_\_\_

**SACC services** are available on site at **Arnett, Howell, Lindeman, and Miles.**

The SACC programs are based on a flat rate billing system, which is calculated by the average cost for the entire program. Full payment is due for each week, even if students do not attend the program due to absences, vacations, etc. The first week of August will be pro-rated to reflect that the program does not begin until Thursday, August 17, 2017.

**The SACC program is only operational from August 17 – August 31 and then again from May 14 – till the last day of school.** Friday Add-On SACC services during the 21<sup>st</sup> Century portion of the school year will be made available for registration/purchase on the 21<sup>st</sup> Century paperwork.

<b>SACC Programs</b>	<b>Days of Program</b> <i>(Please indicate which days of the week your child will attend)</i>	<b>Time of Program</b>	<b>Weekly Rate</b>  Circle the program/payment rate you wish to register for!
<b>Full Time After School</b> (4 to 5 Day Program)	Circle the 4 to 5 days your child will attend: M T W TH F <i>Varies</i>	Dismissal of School–6:00 p.m.	\$55
<b>Part Time After School</b> (1 to 3 Day Program)	Circle the 1 to 3 days your child will attend: M T W TH F <i>Varies</i>	Dismissal of School–6:00 p.m.	\$40
<b>Friday Add-On During 21<sup>st</sup> Century Programming</b>	Friday	Each Friday during the 21 <sup>st</sup> CCLC program that Erlanger/Elsmere schools are in session.	\$ 10

**2017-2018 YMCA Child Care Programming**

Our Child Care programs at Arnett, Howell, Lindeman, and Miles flip between the School Age Child Care (SACC) program and the grant based 21<sup>st</sup> Century Community Learning Center (21<sup>st</sup> CCLC) program.



Families should note that they will not be asked to pay the SACC program's Registration Fee more than once as they flip from SACC and the 21<sup>st</sup> Century Grant program during the calendar school year.

**The SACC Child Care Registration Fee is only charged once per school year.**

Please note that the 21<sup>st</sup> CCLC programs have their own *Registration Form* and process, and session fees **are** associated with each term. The 21<sup>st</sup> Century grant program is by invitation only and is not a child care program. All SACC students are guaranteed a spot if they register!

Families registering for the Friday SACC Add-On service during the 21<sup>st</sup> Century portion of the school year are asked to fill out BOTH the SACC and 21<sup>st</sup> CCLC paperwork because they are two separate programs!

**SACC Program runs August 17 – August 31**  
**21<sup>st</sup> CCLC programs run September 5 – May 10**  
**SACC Program runs May 14 – Last Day of School**

**Office Use Only:**

Y Account #: \_\_\_\_\_

Received by: \_\_\_\_\_

Daxko processed: \_\_\_\_\_

- Sibling Discount Applied
- Receives Scholarship Assistance
- Receives State Assistance



# 2017 – 2018 Child Care: SACC Registration

## Erlanger/Elsmere SACC

<b>Name of Child</b>		<b>D.O.B. (Child)</b>	
<b>School Attending</b>		<b>Height (Child)</b>	
<b>Name of Parent</b>		<b>Weight (Child)</b>	
<b>Parent Email</b>		<b>Part Time SACC Students</b> Circle days you will attend.	M T W Th F
<b>Child's Teacher</b>			

### Emergency Contact Information

Child lives with:    Both Parents       Mother Only       Father Only       \_\_\_\_\_  
 Marital Status:    Married       Divorced       Separated       Single  
 Additional siblings enrolled in Y Child Care?       No       Yes      *(If yes, please list names and programs below)*

Sibling: \_\_\_\_\_ Program: \_\_\_\_\_      Sibling: \_\_\_\_\_ Program: \_\_\_\_\_  
 Sibling: \_\_\_\_\_ Program: \_\_\_\_\_      Sibling: \_\_\_\_\_ Program: \_\_\_\_\_

In the event of an illness/emergency, the following individuals will be contacted in the order listed. **These individuals also have authorization to pick up the above named child.** Two contacts must be listed! **Adults authorized to pick up a child must be 18 years of age or older.**

1 <sup>st</sup> Called	This person will be called first. <b>This must be a parent/guardian.</b>
Parent Name	
Address <small>(Including City, State, Zip)</small>	
Home Phone	
Cell Phone	
Employer	
Employer's Phone	

2 <sup>nd</sup> Called	If the main parent/guardian cannot be reached, this person will be the second contacted.
Parent Name	
Address <small>(Including City, State, Zip)</small>	
Home Phone	
Cell Phone	
Employer	
Employer's Phone	

3 <sup>rd</sup> Called	In the event that the 2 <sup>nd</sup> person cannot be reached, this person would be the next to call.
Contact Person	
Relationship to Child	
Address <small>(Including City, State, Zip)</small>	
Home Phone	
Cell Phone	

4 <sup>th</sup> Called	In the event that the 3 <sup>rd</sup> person cannot be reached, this person would be the next to call.
Contact Person	
Relationship to Child	
Address <small>(Including City, State, Zip)</small>	
Home Phone	
Cell Phone	

Pick up Authorization <i>(During pick up, we utilize a "2 Code Word" system)</i>		
<b>Code #1:</b>		Additional information about our Code Word system is available in the <i>Child Care Handbook</i> .
<b>Code #2:</b>		

## Emergency Medical Authorization

In the event reasonable attempts to contact me or a second individual at the numbers listed in my *Emergency Contact Information* have been unsuccessful, I hereby give my consent for: **(1)** the administration of any treatment by the physician or dentist listed below, or in the event the designated preference is not available, by another licensed physician or dentist; or **(2)** the transfer of the child to the designated preferred hospital listed or any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity of such action, are obtained prior to the performance of the surgery.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

## Medical Preferences and Health History

This section allows you to indicate preferences in doctors/medical facilities and also allows an opportunity to communicate any health history information that can help us ensure a safe and happy experience for your child. Please list any information regarding special medical issues, special dietary needs, allergies, etc. for your child. In order to avoid a delay in your child's enrollment, please fill out all requested information.

<b>An Administration of Medication form is available upon request if your child is to take medications during program hours. *Includes Epi Pens, Inhalers, etc.</b>	<b>Designated Preferred Physician</b>	Name:
		Address:
		Phone:
<b>Designated Preferred Hospital</b>	<b>Designated Preferred Dentist</b>	Name:
		Address:
		Phone:

Current Diagnoses		Dietary Modifications	
Current Medications		Allergies (Foods, Meds, Insects, etc.)	
Disabilities/Operations/ Injuries/Chronic Illnesses		Behavioral/Sensory Considerations	

## Student History/Information:

Are there any special circumstances in the family which may be a factor in your child's behavior?	
In what ways would you like your child to develop during his/her participation in our program?	
Please add any additional comments that you feel might help us understand your child better.	

## Permission to Participate Authorization

Indicate below as to what activities that you will provide permission for your child during programming.

- Yes    No   I give my permission for my child to use all of the equipment and participate in all activities in the program.
- Yes    No   The Y can use photographs, film footage, audio or video tape recordings, etc. which may include my child's image or voice for purposes of promoting and interpreting YMCA programs and services to the general public.
- Yes    No   I give my permission for qualified staff to provide routine health/medical care, necessary first aid, or seek emergency medical treatment for my child if necessary.

## Acceptance Agreement

By signing and dating below, I acknowledge that I have **access to** and I am **responsible for** reading and **adhering to all** policies, procedures, and guidelines referenced in this *Child Care Registration Packet* (including the next two parent take-home pages) and the *Child Care Handbook* that is accessible online or available upon request. I agree to all terms and conditions and the authorizations I have been presented.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date



## Please Keep This Page For Your Records!

### Program Policies and Procedures (SACC)

- Students attending any Y SACC program must be potty-trained.
- All SACC programs will follow the Erlanger/Elsmere School District schedule.
- Under **no circumstances** should my child bring their own toys or electronic devices.
  - Include, but are not limited to: electronic devices/games, video watches, **cell phones**, card games, or other personal items such as nail polish, makeup, etc. The **staff will confiscate the item** and return it to the parent at the end of the day.
- A detailed record of my child(ren)'s arrival and departure will be documented. Child(ren) must be signed in and out of the program with the time noted of their arrival and departure.
  - **This is a state law and must be done every day.**
  - Individuals receiving financial/state assistance are required to participate in additional reporting and documentation.
- All Y programs have a nit free lice policy, which is different from the public school system.
  - If your child is found with lice or nits/eggs, the child may not attend the program. Student may not return until they have been checked and cleared by the Site Director or a Family Life Director.
- The program will often enlist special programming from outside resources and non-Y individuals may engage in activities with my child. At no time, under any circumstances, will a child be engaged in said activity without a Y staff member present. (i.e.: Library bus visits, special event visits, off-site field trips, tutoring sessions, etc.)
- I understand that I must review and FULLY complete and submit all requested paperwork prior to the start of the program. This includes providing a Kentucky Immunization Certificate.
  - An expiration date must be documented on the certificate.
  - A copy of shot records or out of state records will not be accepted.
- If Erlanger/Elsmere Schools are closed, the Y SACC programs operating out of a school building will not be in session. SDO and Snow programs will be available at our Arnett Elementary location only.
  - Families must purchase/register for the SDO (School Days Out) program in advance.
  - Families can pre-purchase Snow Day Insurance to guarantee their student a spot in the Snow Day program. Even with insurance, the daily Snow Day rate applies for each day used.
  - Parents can bring their child to the Snow Day program and purchase registration for the day - if space is available.





## YMCA Policies

**Your child's safety, privacy, and security is our number one priority!** Our staff goes through extensive training to help ensure the wellbeing of each child in our program. Parents must agree to the following in relationship to their child:

- The YMCA is not responsible for personal property lost, stolen or broken, while participating in the program. Items in the Lost & Found are donated weekly to Goodwill®.
- Students and their families must adhere to the YMCA Code of Conduct. The Y holds both parents and students accountable for the Code of Conduct and may restrict access to any Y programming upon breach of this code.
- You expressly acknowledge on behalf of yourself and your heirs that you assume the risk of any and all injuries and illnesses, which may result from your child's participation in program activities. Parents/Guardians agree to release and discharge the Y, its agents' servants, and employees from any and all claims for injury, death, loss or damage, which a child may suffer as a result of their participation in program activities.
- To meet mandatory reporting responsibilities (i.e.: United Way requirements, state reporting mandates, program evaluations, etc.) information is shared with internal and external identities as part of the process of interpreting YMCA programs.

## Financial Policies and Procedures

- Absences are **not** prorated. If a child will be absent from the program, parents must not only call their child's school, but they must also contact their Site Director prior to 9:00 a.m.
- There is a late fee of \$1.00 per minute/per child after the designated pick up time.
  - The person picking up the child will sign the late fee slip to acknowledge charges and the parent's credit/debit card on file will be charged.
- To **change or withdraw** a child from a selected Child Care program, parents must complete a **Change of Program form**. **No** verbal or over the phone withdrawals or changes are accepted. It is recommended to keep a duplicate copy of this form for your records.
  - **Change:** Form must be submitted a minimum of 1 week prior of the affected date.
  - **Withdraw:** Form must be submitted a minimum of 2 weeks prior to the child's last day.
- All SACC programs are based on a flat rate billing system, which is calculated by the average cost for the entire program. Full payment is due for each week, even if students do not attend the program due to absences, vacations, etc.
  - The week of August 14<sup>th</sup> will be discounted due to school calendar. (The first day of school/program is August 17.) This is the only pro-rated week of the SACC program.
- **A valid credit/debit card must be on file for all Child Care payments.** Credit/debit cards will be charged in full on the weekly billing cycle for the program selected on the *Registration Packet* or according to special arrangements documented with the Billing Department.
  - Weekly billing is charged the Friday prior to the week attending.
  - Special payment arrangements are available through the billing department. If approved, families can pay weekly by check or money order. **NO CASH ACCEPTED!**
- If a payment is unable to be processed, parents will be notified and **full payment** for the week is expected **prior** to a child's attendance.
  - If payment is not received within 3 business days of its due date, an additional **\$25 late payment fee** will also be added to the overdue payment.
  - The child may **not** return to the program until tuition is received and all balances are paid in full.
- The R.C. Durr YMCA will provide a tax statement that will be mailed out by January 31st for child care payments (including camp) during the previous year.
- Registration will be denied to any individuals who have outstanding Y balances from last year's camp, child care, or from any other YMCA programs. All outstanding balances must be paid in full prior to registration.