



2017-2018 Child Care PRESCHOOL

Locations: R.C. Durr Y & North Pointe

We are so excited that you are interested in Y Preschool for your child! Families can customize the program that works for them.

- ☺ **HOLD A SPOT FOR YOUR CHILD!** Families may reserve a spot for their child by submitting:
● **Registration Packet** with registration fee ● **KY Immunization Certificate.**

Early Education Registration Fee

Registration Fee: \$50 per child

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

*Monthly Billing: Charged 1st of every month
Weekly Billing: Charged the Friday prior to the week attending*

2017-2018 School Year

The month of August is PRORATED!
Families will be billed on August 11!

*Rates will also be reduced during December
(Winter Break) and April (Spring Break).*

☺ **CONVENIENT STATE LICENSED LOCATIONS!**

- **R.C. Durr Y**
- **North Pointe Elementary** open to the public.

☺ **R.C. DURR LOCATION ONLY: WE TAKE NON-POTTY TRAINED CHILDREN!**

☺ **CUSTOMIZE YOUR SERVICES!**

- Full Day Preschool: 6:30 a.m.–6:00 p.m.
- Half Day Preschool: 8:30 a.m.–12:00 p.m.
- Full Time Preschool: 4-5 days.
- Part Time Preschool: 1-3 days.
- Half Day Preschool Daily options: 4-5 days, 3 days (M/W/F), or 2 days (T/Th).

☺ **BREAKFAST AND HOT LUNCH PROGRAM INCLUDED!**

☺ **EASY TO BUDGET FLAT RATE BILLING SYSTEM!**

- Tuition is charged to a credit/debit card on file.
- We offer weekly or monthly payment options.
- 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.

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

☺ **STATE CHILD CARE ASSISTANCE AND Y 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.

YMCA PRESCHOOL
BUILDING STRONGER FUTURES
grow. learn. thrive.



☺ **WE OFFER SDO (SCHOOL DAYS OUT) AND SNOW DAY PROGRAMS AT R.C. DURR Y!**

○ **Full Day Preschoolers:**

- Full Day Preschoolers do **not** pay extra for attending on days that BC Schools are closed.
- When NPE is closed, Full Day Preschoolers attend at R.C. Durr Y.

SCHOOL DAYS OUT

Half Day Preschoolers must purchase the SDO program if Boone County Schools are closed for the day.

SDO DAILY PROGRAM FEES

Half Day Preschool:
\$25 per day, per child

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

Full Day Preschool: N/A

**BRIGHT
BEGINNINGS
START HERE**



SNOW DAY

Half Day Preschoolers must purchase the Snow Day program if Boone County 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

Half Day Preschool: \$25 per day, per child
Non-Program Participants: \$35 per day, per child
Full Day Preschool: N/A

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

☺ **OUR PRESCHOOLS HAVE EARNED A 2 OR 3 STARS RATING!**

- STARS for KIDS NOW program is Kentucky's voluntary quality rating system for child care providers.

☺ **WE OFFER A WELL-ROUNDED CURRICULUM!**

- 40% Academic / 60% Developmental
- Our focus for students is kindergarten readiness.

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

- ★ ○ Barbel Kyser, Site Director (North Pointe) bkyser@myy.org 859-334-7000
- Robin Snyder, Site Coordinator (R.C. Durr) rsnyder@myy.org 859-912-0078
- Tami Chapman, Senior Program Director of Family Life tchapman@myy.org 859-334-6522
- Beth Texley, Billing Department etexley@myy.org 859-334-6513



Note: The above phone numbers for our Site Director at North Pointe Elementary are lines to the school and are only accessible during school hours/school year; the office staff can transfer you to the appropriate extension. Contact Tami Chapman 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 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 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**



PRESCHOOL

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! BC schools start date for this year is August 16, 2017.

Student Information			
Name			
Nickname (if applicable)			
Street Address			
Apartment # (if applicable)			
City/State/Zip			
Gender (Circle)	Male Female	D.O.B.	
Age		Grade	<i>Preschool</i>
Location	<input type="checkbox"/> R.C. Durr <input type="checkbox"/> North Pointe		

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 Preschool. 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 CHILD CARE program.

Registration Fees

Registration: \$50 per child

Non-refundable/Non-transferable/Due at the time of registration

Tuition Rates

Tuition is charged to a credit/debit card on file.

Monthly Billing: Charged 1st of every month

Weekly Billing: 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 Preschool fees.
- Ⓞ My credit/debit card will be charged in full on the billing cycle (monthly or weekly) for the program I have selected on this registration form or according to special arrangements I have documented with the Billing Department. (Monthly billing is charged on the 1st of every month / Weekly billing is charged the Friday prior to the week attending.) 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 withdrawals 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 Preschool program.

Parent Signature: _____ Date: ____ / ____ / ____



Student's Name: _____

Preschool is available on site at **R.C. Durr YMCA** and **North Pointe Elementary**. All of our Half Day Preschool programs follow the Boone County Public School District Calendar. Full Day Preschoolers follow the Y Program Calendar. Please note: that NPE Full Day Preschoolers must attend services at the R.C. Durr facility if the North Pointe school building is closed!

All programs are based on a flat rate billing system, which is calculated by the average cost for the entire school year. Full payment is due for each month, even if students do not attend the program due to absences, vacations, etc. The months of August, December, and April will be prorated months due to school calendar.

YMCA Child Care Programs	Days of Program <i>(When applicable, please indicate which days of the week your child will attend)</i>	Time of Program	Circle the program/payment rate you wish to register for!	
			Monthly Flat Rate	Weekly Flat Rate
Preschool – Half Day 4 to 5 Day Program	Circle the 4 to 5 days your child will attend: M T W TH F	8:30 a.m.–12:00 p.m.	\$320	\$80
Preschool – Half Day 3 Day Program	Monday, Wednesday, Friday <i>(These are the 3 set days for the 3 Day program)</i>	8:30 a.m.–12:00 p.m.	\$240	\$60
Preschool - Half Day 2 Day Program	Tuesday, Thursday <i>(These are the 2 set days for the 2 Day program)</i>	8:30 a.m.–12:00 p.m.	\$172	\$43
Preschool – Full Day 4 to 5 Day Program	Circle the 4 to 5 days your child will attend: M T W TH F	6:30 a.m.–6:00 p.m.	\$640	\$160
Preschool – Full Day 1 to 3 Day Program	Circle the 1 to 3 days your child will attend: M T W TH F	6:30 a.m.–6:00 p.m.	\$400	\$100

Office Use Only:

Y Account #: _____

Received by: _____

Daxko processed: _____

Sibling Discount Applied

Receives Scholarship Assistance

Receives State Assistance



2017–2018 Boone County Child Care Registration

Name of Child		D.O.B. (Child)	
School Attending		Height (Child)	
Name of Parent		Weight (Child)	
Parent Email			

Program Location

- Preschool at R.C. Durr Y Preschool at North Pointe
 Ext. K at R.C. Durr Y Ext. K at North Pointe Ext. K at Thornwilde
 SACC at R.C. Durr Y SACC at North Pointe SACC at Thornwilde

Part Time Students

Circle days you will attend.

M T W Th F

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

2 nd 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 rd Called	In the event that the 2 nd 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 th Called	In the event that the 3 rd 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 (During pick up, we utilize a "2 Code Word" system)

Code #1:		Additional information about our 2 Code Word system is available in the <i>Child Care Handbook</i> .
Code #2:		
NPE & TES ONLY:	Ext. K ONLY students who end their day at 3:40 p.m. have the option of being a parent pick up or bus rider. Please indicate to the right which option you choose for your child. Please note that parents are responsible for completing transportation information at their child's school.	<input type="checkbox"/> 3:40 Bus Rider <input type="checkbox"/> 3:40 Car Rider

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.

An Administration of Medication form is available upon request if your child is to take medications during program hours. *Includes Epi Pens, Inhalers, etc.	Designated Preferred Physician	Name:
		Address:
		Phone:
Designated Preferred Hospital	Designated Preferred Dentist	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.
- Yes No My child can participate in any walking excursions near/around the program facility. This includes, but is not limited to, areas of the Boone Woods Park, the Outdoor Garden, etc.

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

- Students attending any SACC or Ext. K program or attending Preschool at North Pointe must be potty-trained. Preschool students attending R.C. Durr Y do not have to be potty-trained.
- All Half Day Preschool, Ext. K, and SACC programs will follow the Boone County Public School schedule. Full Day Preschool programs follow their own calendar schedule.
- We do have a bus agreement with Boone County Transportation. However, **a student can only be issued ONE bus number/bus stop for pick up and ONE bus number/bus stop for drop off!** Students **cannot** have a mix of a.m. and p.m. pick up to get to school or to get home.
 - Parents are responsible for setting up their child’s transportation needs through their child’s school.
- 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/Coordinator.
- 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 Boone County Schools are closed, the Y programs operating out of a school building will not be in session. SDO and Snow programs will be available at our R.C. Durr YMCA.
 - 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 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.



	BC Schools on a Delay	BC Schools have an Early Dismissal
R.C. Durr YMCA	Full Day Preschool, Ext. K and SACC students can report at their normal time if providing their own transportation. Half Day Preschool is cancelled if schools are on any type of delay.	Schools will still bus students to R.C. Durr Y if families indicate that on their school paperwork.
NPE & TES 	<p>Before school services also open on a 1-2 hour delay. (7:30/8:30 a.m.)</p> <p>Half Day Preschool is cancelled if schools are operating on any type of delay.</p> <p>On a 1-hr delay, AM Ext. K students registered in the Before program can arrive at 7:30 a.m. / AM Ext. K ONLY could not arrive until 9:30 a.m.</p> <p>On a 2-hr delay, AM Ext. K students registered in the Before program can arrive at 8:30 a.m. / The program for AM Ext. K ONLY students is CANCELLED. Students who are PM Ext. K cannot arrive before 11:45 a.m.</p>	If schools dismiss early, the After school program is cancelled. Students in Preschool & Ext. K will be called to be picked up or put on a bus, depending on what parents list on their Y Early Dismissal paperwork!

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 – they must also **contact their Y Site Coordinator or 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 programs are based on a flat rate billing system, which is calculated by the average cost for the entire school year. **Full** payment is due for each month, even if students do not attend the program due to absences, vacations, etc.
 - The months of August, December, and April will be discounted months due to school calendar.
 - Families who register for a program after a new month has started and wish to be on a monthly billing cycle, will be charged at a prorated rate to reflect the child's start date.
- **A valid credit/debit card must be on file for all Child Care payments.** Credit/debit cards will be charged in full on the billing cycle (monthly or weekly) for the program selected on the *Registration paperwork* or according to special arrangements documented with the Billing Department.
 - Monthly billing is charged on the 1st of every month for the current month attending.
 - Weekly billing is charged the Friday prior to the week attending.
- If a payment is unable to be processed, parents will be notified and **full payment** for the month 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.