

# WELCOME TO THE WINTHROP AREA YMCA KIDS CLUB 2017-2018



**We Build Strong Kids, Strong Families, Strong Communities**

Winthrop Area YMCA

KIDS CLUB

29 Town Hall Lane

Winthrop, ME 04364

YMCA OFFICE **207-377-9686**

EMAIL : **winymca@aol.com**

**To Reach Kids Club during Kids Club Hours 2:15 to 5:00pm**

**207-215-3080**

*Revised July 2017*

**KENNEBEC VALLEY UNITED WAY AGENCY**

We hope this is a pleasant experience for you and your family. This handbook is intended to help guide you with information about our program and our policies. However it does not cover every situation that will arise. In order for your child / children to be successful in the program, it is important to maintain good communication. Please feel free to call us anytime to discuss concerns that you may have at 377-9686.

**WINTHROP AREA YMCA PHILOSOPHY**

The Winthrop Area YMCA Kids Club philosophy is to provide your child with a fun and safe environment, in which we promote self-esteem, develop social relations skills, and build on "CHARACTER" development skills (CARING, HONESTY, RESPECT, and RESPONSIBILITY) This Kids Club program promotes physical development as well as stressing strong academics and creativity.

**CURRICULUM**

The Kids Club uses developmentally appropriate practices for all ages. The children can look forward to many interesting activities. Each day they will have the opportunity to use the gym, go outdoors, participate in planned activities and projects, have a nutritious snack, do homework and read and time for free play with individual choices as well as socialization time.

**PARTICIPANTS**

Kids Club is for Boys and Girls in Grades K-1-2-3-4-5

**HOURS & DAYS OF OPERATION**

**After School dismissal until 5:30pm**

**Early Release Days from dismissal to 5:30pm**

The Kids Club program ends **PROMPTLY at 5:30pm**, Please pick your child up at or before that time.

**THERE WILL BE A LATE PICK UP FEE OF \$10.00 FOR EACH 15 MINUTES AFTER 5:30PM.**  
*NO EXCEPTIONS WILL BE GRANTED FOR LATE PICK UP FEE*

**There will not be Kids Clubs on:**

Labor Day	Columbus Day	Thanksgiving (Thursday and Friday)
Memorial Day	Veteran's Day	Martin Luther King's Birthday
Christmas Vacation Days	February Vacation Week	April Vacation Week

If there are any changes we will notify parents

**PAYMENTS AND FEES** *(pay as use)*

\$75.00 per week

\$17.00 for individual days, including Early Release Days.

Number of Days Attending	Amount Due	If 2 children
1	\$ 17.00	\$ 29.00
2	\$ 34.00	\$ 63.00
3	\$ 51.00	\$ 97.00
4	\$ 68.00	\$ 131.00
5	\$ 75.00	\$ 145.00

***There will be a \$20.00 fee for all checks that are returned for Insufficient Funds.***

- ❖ **Fees are to be paid WEEKLY, on your last day of that week.**
- ❖ For 2017-18 school year, families that have a balance of over \$150.00 per child will be alerted on Monday that if the balance is not paid by that Friday they will not be able to attend the following week.
- ❖ A \$10.00 late fee will be added after 2 weeks late, it will be added for each week you are late in paying.

## **FINANCIAL ASSISTANCE**

The program has some funding available to help families who qualify, to have reduced child care fees. To qualify for these funds a family must be income eligible, forms are available at the YMCA Office. Those who have received scholarships in past years must complete a new application each year.

## **IRS STATEMENTS**

The payment booklet is your record of childcare expenses paid. Please retain the stub for your records. Our Tax ID # is listed on this stub. This payment booklet only covers KIDS CLUB after school program.

## **ARRIVAL AT KIDS CLUB**

Kids Club members will come to COMPUTER LAB-Mrs Rosie's Room when Bus Students are dismissed. When they arrive they will check in with the Staff, put their belongings away in designated areas, and will have a snack.

## **CHILD NOT ATTENDING**

If your child is scheduled to attend KIDS CLUB and your plans change, because of sickness or other reasons, we ask you to call **the Grade School office and ask to leave a message for KIDS CLUB**, before noon and notify our staff.

## **DISMISSAL**

Children will only be allowed to leave KIDS CLUB, when they are signed out by a family authorized person. That authorized person must be on the registration card. If there is a change we must have written authorization to allow a child to be released to someone new. Children are only released to parents, or people who have been designated by parents to pick up their children.

## **MEDICATION & EMERGENCY CARE**

Every child must have a medical card and registration card on file. This will list allergies, medical conditions, and medications. All medications must be in an original container, and have written permission EVERY time your child needs medication. Medication must be in the possession of our staff. Children are not to have medication in their possession.

## **HEALTH & SAFETY**

If your child has a known medical condition please be sure to inform the KIDS CLUB staff of special instructions pertaining to the condition. If your child should have one of the following conditions the parents will be notified to pick up the child immediately: a contagious disease, fever, vomiting or diarrhea.

In case of an accident, or illness the parents of the child will be notified immediately. In serious cases, the child will be taken to an area Emergency Room.

## **CHILD'S PERSONAL BELONGINGS**

Please send appropriate clothing for the outdoors. We will go out as often as possible.

Electronic games are allowed only on Fridays, and workshop days. Your child is responsible for them. Please help them understand that they could get lost, damaged or broken, and that Winthrop Area YMCA Kid's Club is not responsible.

## **SCHOOL CANCELLATION**

- If there is no school because of bad weather or other emergency there will be no Kids Club.
- If school is early dismissed because of weather, please listen to the message sent out by the school to see if KIDS CLUB is closed. We will try our best to stay open

## **BEHAVIOR & DISCIPLINE**

*Children are entitled to a pleasant and harmonious environment. The program cannot serve children who display chronically disruptive behavior. Chronically disruptive behavior is defined as: verbal, or physical activity which may include but not limited to such behaviors that require constant attention from the staff, inflicting physical or emotional harm on other children or staff, abuse of staff, ignoring or disobeying the rules which guide behavior during the day at school and program time.*

***If a child cannot adjust to the program and behave appropriately we will take the following action:***

***First Offense: Child will be given a warning and the parents will be given a verbal report at pick up time of the incident.***

***Second Offense: Parents will be called and asked to speak with their child about their behavior. Parents will be given a written report at pick up time.***

***Third Offense: Parents will be called and asked to come and pick up their child immediately.***

***If, when the child returns the behavior continues to be an issue, then the parents will be called to come and pick up child, and the child will be unable to return to Kids Club for a period of at least 1 week.***

***Violence or threatening behavior towards other participants or staff will be cause for immediate dismissal from the program. Parents would be called and until the child is picked up we will remove them from the program.***

Please take a moment and discuss with your child the  
"KIDS CLUB" Code of Conduct.

When you have finished please sign and return it with your registration information.

WINTHROP AREA YMCA  
KIDS CLUB  
Application for Enrollment  
**Agreement for Services**

In consideration of the Winthrop Area YMCA (herein "YMCA") accepting your child in this after school program known as the Winthrop Area YMCA Kids Club, you the Applicant agree as follows:

**1. CARE GIVEN**

While your child is in our care, the Winthrop Area YMCA will provide a range of physical, educational and other activities appropriate to the age of your child as determined by the YMCA. The physical activities may include but are not limited to such sports as baseball, soccer, basketball, dodge ball, kickball, running, playground use, snow sliding and other exercise. Participants will do homework and read each day as a part of the regular program.

If there is any physical activity your child should not be participating in, it is your responsibility to notify the YMCA and list such limitations in the "Authorization and Release for Medical Care" required as a part of this Application Agreement (referred to herein as "Agreement"). The administration of any medication required for your child shall also be governed by separate agreement.

**2. WHEN CARE BEGINS AND ENDS**

The responsibility of the YMCA to care for your child will begin when your child is directly under the care of the YMCA staff, and it will end when your child is turned over to you, a parent/guardian, or authorized person named by you in this agreement

**3. FEES**

\$75.00 per week

\$17.00 for individual days, including Early Release Days.

Number of Days Attending	Amount Due	If 2 children
1	\$ 17.00	\$ 29.00
2	\$ 34.00	\$ 63.00
3	\$ 51.00	\$ 97.00
4	\$ 68.00	\$ 131.00
5	\$ 75.00	\$ 145.00

***There will be a \$20.00 fee for all checks that are returned for Insufficient Funds.***

❖ **Fees are to be paid WEEKLY, on your last day of that week.**

❖ For 2016-17 school year families that have a balance of over \$150.00 per child will be alerted on Monday that if the balance is not paid by that Friday they will not be able to attend the following week.

❖ A \$10.00 late fee will be added after 2 weeks late, it will be added for each week you are late in paying.

Until either the YMCA or you terminate or amend this Agreement as provided herein. If a child should attend an extra day at the end of a given week, the appropriate additional daily fee will be charged.

Scholarships are available and are based upon financial need. Please contact the YMCA Director or KIDS CLUB staff for this application. The YMCA reserves the right to amend the fee schedule at any time. However the YMCA will send written notice to the Applicant of any fee changes two weeks prior to them becoming effective.

**4. TERMINATION OR AMENDMENT OF THIS AGREEMENT**

This agreement will automatically terminate at the end of the sooner, the end of the school year or June 30<sup>th</sup> of the next year.

The applicant will be liable for the fee stated on this agreement until a new agreement is completed, signed and returned, stating the new hours of attendance, or the time period up to when this agreement is terminated. Any outstanding fees for prior care shall remain enforceable against the undersigned even after termination of this Agreement by either party.

The YMCA may terminate this Agreement prior to the automatic termination date upon written notice sent to the Applicants last known address, for any lawful reason, including but not limited to breach of the terms of this Agreement by Applicant or circumstances beyond the control of the YMCA. The YMCA shall not be responsible for any compensatory, or direct or indirect damages of any kind as a consequence of terminating this agreement.

**5. ASSUMPTION OF RISK**

The applicant understands and agrees that there are inherent risks of injury associated with any physical activity. To the extent permitted by law, Applicant both for Applicant’s self and for the Applicant’s Child hereby:

- I) Acknowledges the inherent risk from said activities to either Applicant’s Child or to other children in this program, including medical care that may be given as a result of injury.
- II) Agrees to assume said risk and,
- III) Agrees to indemnify and hold harmless the Winthrop Area YMCA, State YMCA of Maine, Winthrop Public Schools their staff, volunteers, or agents from any lawsuits, demands, or claims for damages or injury of any kind, including expenses and attorney fees incurred as consequences, arising from the Applicant’s child participating in or observing activities at the YMCA, including injury or damage Applicant’s child may cause another.

The Winthrop Area YMCA does not discriminate on the basis of race, religion, ethnicity, sex, disability or any other protected basis. We seek to reasonably accommodate all who wish to participate in our programs.

I have read all the provisions of this Agreement as well as the KIDS CLUB handbook and agree to abide by all the terms and conditions set forth in those documents

\_\_\_\_\_  
\*\*\* Applicant’s Parents/Guardians Signature / For self and Applicant’s Child

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Applicant’s Parents/Guardians Signature / For self and Applicant’s Child

\_\_\_\_\_  
Relationship to Child

**\*\*\* Signature of at least one parent /guardian**

## RELEASE OF PHOTOGRAPHS

I understand that pictures are taken throughout the year at many YMCA program activities. These pictures may be made public and used by the YMCA in articles, publications, promotional material, and other display methods in furtherance of benefiting the Winthrop Area YMCA.

I give permission for pictures to be taken of my child \_\_\_\_\_,  
and used for the above stated purposes.

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Parental / Guardian Signature

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DATE

WINTHROP AREA YMCA  
KIDS CLUB  
**Code of Conduct**

Every child enrolled in the KIDS CLUB is required to adhere to the following Code of Conduct.

LISTEN TO AND *RESPECT* ALL ADULTS

TAKE *CARE* OF EQUIPMENT AND TOYS OF THE PROGRAM AND OF OTHERS

BE *HONEST* IN WORKING WITH OTHER PARTICIPANTS AND STAFF

BE *RESPONSIBLE* FOR YOUR OWN ACTIONS, CLEANING UP AFTER ACTIVITIES AND SNACK TIME, AND PUTTING AWAY THINGS THEY GET OUT.

APPROPRIATE LANGUAGE WILL BE USED AT ALL TIMES, STAFF WILL DETERMINE WHEN LANGUAGE IS INAPPROPRIATE.

PARTICIPANTS WILL ADHERE TO THE SCHEDULE SET UP BY THE STAFF AND UNDERSTAND THEY MUST BE A PART OF THE PROGRAM. THIS WILL INCLUDE DOING HOMEWORK AND READING, AND GOING OUTSIDE TO PLAY EACH DAY UNLESS WEATHER IS INCLEMENT.

I have read the KIDS CLUB Code of Conduct and have discussed it with my child. I agree to the standards set and will support the Code of Conduct.

***If a child cannot adjust to the program and behave appropriately we will take the following action:***

***First Offense: Child will be given a warning and the parents will be given a verbal report at pick up time of the incident.***

***Second Offense: Parents will be called and asked to speak with their child about their behavior. Parents will be given a written report at pick up time.***

***Third Offense: Parents will be called and asked to come and pick up their child immediately.***

***If, when the child returns and the behavior continues then the parents will be called to come and pick up child, and the child will be unable to return to Kids Club for a period of at least 1 week.***

Parental Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Child's Name \_\_\_\_\_

Winthrop Area YMCA  
KIDS CLUB

# Application for Enrollment

CHILD'S NAME \_\_\_\_\_ GRADE \_\_\_\_\_

CHILD'S DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ TEACHER: \_\_\_\_\_

HOME PHONE \_\_\_\_\_

HOME ADDRESS (Mailing) \_\_\_\_\_

\_\_\_\_\_

PHYSICAL ADDRESS (if different) \_\_\_\_\_

\_\_\_\_\_

Parent / Guardian Names \* \_\_\_\_\_

*\* Must be either the parent or legal guardian to apply*

## Mothers Contact Information

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

## Fathers Contact Information

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Family Email:** \_\_\_\_\_

*ONE EMAIL ADDRESS IS REQUIRED SO WE CAN COMMUNICATE WEEKLY*

**Second Email:** \_\_\_\_\_

Persons (*other than parents*) authorized to pick up child from the program:

\_\_\_\_\_ (Phone) \_\_\_\_\_

\_\_\_\_\_ (Phone) \_\_\_\_\_

Persons (*other than parents*) that should be notified in an emergency:

\_\_\_\_\_ (Phone) \_\_\_\_\_

\_\_\_\_\_ (Phone) \_\_\_\_\_

My Child will be attending the KIDS CLUB Program on the following days:

**MON** \_\_\_\_\_ **TUES** \_\_\_\_\_ **WED** \_\_\_\_\_ **THUR** \_\_\_\_\_ **FRI** \_\_\_\_\_

# **AUTHORIZATION AND RELEASE FOR MEDICAL CARE**

In the event that the child named herein should have a sudden illness or accident while attending the YMCA KIDS CLUB program, I understand:

The staff will make attempt to reach me for instructions. If that cannot be done immediately or the situation is viewed as critical by the staff members in charge, I request that one of the following physicians be called, but if the emergency treatment is needed immediately, I authorize the YMCA staff to immediately request assistance from rescue personnel, or to deliver my child to the nearest emergency room and to consent to any emergency treatment that is recommended by rescue or emergency room staff. It is understood that efforts will be made to contact the undersigned before treatment is given if time permits, but that treatment will not be withheld if I cannot be reached.

It is also understood that I will be responsible for all costs involved in treatment of this minor child. In addition to any other agreement I have with the YMCA, I understand the Winthrop Area YMCA, State YMCA of Maine, Winthrop Public Schools, their staffs, volunteers, or agents shall not be liable for any injury sustained by the child during this program, and I accept full responsibility for any accident or injury which may occur.

**NAME OF CHILD** \_\_\_\_\_ **PARENT'S NAME** \_\_\_\_\_

**Family Physician** \_\_\_\_\_ **Address** \_\_\_\_\_ **Town** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Family Dentist** \_\_\_\_\_ **Address** \_\_\_\_\_ **Town** \_\_\_\_\_ **Phone** \_\_\_\_\_

INSURANCE CARRIER \_\_\_\_\_ POLICY # \_\_\_\_\_

## **HEALTH INFORMATION**

*Please note any conditions that affect your child, and symptoms which may help us identify possible problems:*

### **ALLERGIES:**

Food Allergies \_\_\_\_\_

Symptoms: \_\_\_\_\_

Drug Allergies \_\_\_\_\_

Symptoms: \_\_\_\_\_

Insect or Other

Allergies \_\_\_\_\_

Symptoms: \_\_\_\_\_

### **CONDITIONS:**

Asthma: \_\_\_\_\_ Symptoms: \_\_\_\_\_

Diabetes: \_\_\_\_\_ Symptoms: \_\_\_\_\_

Seizures: \_\_\_\_\_ Symptoms: \_\_\_\_\_

Others \_\_\_\_\_ Symptoms: \_\_\_\_\_

### **LIMITATIONS:**

Identify any activities your child should not be participating in:

Set forth any special instructions we should be aware of concerning the care of your child:

I have read all the provisions of this Release for Medical Care as well as the KIDS CLUB Handbook and agree to abide by all terms, conditions, and policies in those documents. KIDS CLUB will rely on the information I have provided in the application and other written agreements until such time as I notify KIDS CLUB in writing otherwise.

\_\_\_\_\_  
Parent's or Guardian's Signature

\_\_\_\_\_  
Date