



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

**Y'S KIDS SUMMER  
ENROLLMENT PACKET**

**FOR 2019**

2 Day

3 Day

5 Day

(Please check one)

**DATES: CHECK OFF ONE WEEK OR CHECK OFF THE ENTIRE SUMMER.**

June 24-June 28

July 1-July 5 (closed for the 4<sup>th</sup>)

July 8-July 12

July 15-July 19

July 22-July 26

July 29- August 2

August 5-August 9

August 12-August 16

August 19-August 23

**BEFORE YOUR CHILD MAY ATTEND, YOU NEED TO**

- **Complete and return this packet to the Reception Desk  
With first week's payment**
- **Receive a parent handbook**

YMCA of Greater Westfield  
67 Court Street  
Westfield, MA 01085  
(413) 568-8631 fax (413) 572-3995  
[www.westfieldymca.org](http://www.westfieldymca.org)



**YMCA of Greater Westfield Child's Enrollment Form**

**Summer 2019**

**Child Information**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age at Admission: \_\_\_\_\_ Date of Admission: \_\_\_\_\_

Child's Home Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Primary Language: \_\_\_\_\_ Identifying Marks: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Skin Color: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_



**Parent/Guardian Information**

Parent/Guardian Name: \_\_\_\_\_

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

Home Address: \_\_\_\_\_

Reachable Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Hours at Work: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

Home Address: \_\_\_\_\_

Reachable Phone Number: \_\_\_\_\_



**TRANSPORTATION POLICY  
2019 SUMMER**

**FROM THE PROGRAM:** Transportation is provided by the YMCA to and from field trips through 5 Star Buses.

On the bus, children are responsible for their own behavior, or stand the chance of losing bus privileges (see policy attached).

Children coming from summer school must provide their own transportation to the YMCA.

**FROM THE PROGRAM:** All children must be picked up by a parent or authorized adult as indicated on the child's information form. No transportation is provided at the end of the program day.

Walkers-A child may be released from the program to walk home only if written authorization is given by the parent and they are 10 years of age or older.

Field Trips-Any field trip will require a parent to sign a permission slip indicating the means of transportation, whether walking or bus. No child may attend a field trip without permission.

**BUSSING POLICIES  
YMCA AFTER SCHOOL PROGRAM/ 5 STAR**

The following policies describe the expected behavior for children riding the YMCA/5 Star for fieldtrips and these are acceptable steps for any 5 Star driver/ bus monitor to take if a child does not follow those guidelines. Each child riding the bus, their parent, and any driver for the program must review these policies and sign to indicate their acceptance of the guidelines.

**EXPECTED BEHAVIOR OF CHILDREN:**

1. Stay in your seats.
2. Keep hands to yourself-not out the window or on other children.
3. Keep voices and noise level low in order to not distract the driver.
4. Throwing objects, inappropriate language, or disrespectful treatment of anyone on the bus will not be tolerated.

**APPROPRIATE STEPS FOR THE DRIVER TO MAINTAIN SAFETY AND ENFORCE BEHAVIOR  
EXPECTATIONS:**

1. The first time a child exhibits inappropriate behavior, the driver should issue a verbal warning.
2. At the second offense, the driver should notify the Site Director at the Child Care Center, and let the child know that the Director will be calling their parents to discuss the problem. The driver should then issue a written warning.
3. A third offense will lead to official probation of at least two weeks. If at any time a child breaks the policy on the bus they will be asked to find other transportation.
4. When a child has accumulated 3 written warnings, it will result in transportation privileges being revoked.

The driver must agree to: Not put any child in physical danger, not use their hands or bodies in any way against a child, not use inappropriate language, not threaten, demean or in any way verbally abuse a child. The driver's role is to maintain safety through reminders to the children about the rules, but not through discipline beyond what is listed here. The staff at the program and the parent will be the primary disciplining adults.

*Parent/ Guardian Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

## PROCEDURES FOR Y'S KIDS SUMMER 2019

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I authorize staff in the child care program who are trained in the basics of first aid to give my child first aid when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize the program to transport my child to the nearest medical care facility and/or to \_\_\_\_\_ and to secure necessary medical treatment for my child.

In exercising her discretion under the guidelines above, the Youth Development Director may request the child and/or the child's parents or guardians to attend conferences with the program personnel regarding matters that potentially warrant termination. The child's parents or guardians may also request a conference with the Youth Development Director or Asst. Youth Development Director regarding policies or matters potentially warranting termination.

The Youth Development Director shall have the sole right and responsibility to determine any disputed factual matters regarding termination of the agreement.

I agree to cooperate with the general policies of the program as outlined in the Parent Handbook and herein, to perform the obligations of parents and guardians set forth in this agreement, and to abide by the rules, regulations and manuals promulgated and provided by the program. My signature below indicates that I have read the terms of the Agreement and that I have read and understand the rules and policies of the program.

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

I give permission for my child \_\_\_\_\_ to be transported from his/her school to the YMCA Child Care Center. I have read and understand the attached policies for child behavior on the bus and driver management and have discussed these with my child. I understand that transportation will be through 5 Star Bus Co. and that program staff will be riding the bus.

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

I give my permission for photographs of my child to be used in any promotional materials for the YMCA, including print in newspapers and videos made by the children and staff for projects.

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

I give permission for my child \_\_\_\_\_ to attend any walking field trips and/or participate in planned activities that would be within walking distance of the Child Care Center.

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



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Permission for use of on-site swimming pool for Y's Kids 2019 Summer

I hereby give the YMCA of Greater Westfield Y's Kids permission to allow my child \_\_\_\_\_ who is \_\_\_\_\_ years old to use the on-site swimming pool at the program. I understand that my child must be directly supervised by the Educator(s) at all times, and that there will be a second adult on the premises to assist in case of an emergency whenever the pool is in use.

\_\_\_\_\_  
Parent's / Guardians Signature

\_\_\_\_\_  
Date:

**Y's Kids Child Care Agreement**

**I understand that the Y's Kids Child Care program runs for the entire summer. Weeks are not prorated based on attendance. Payments are due the Friday before each week, past balances will result in termination from summer programs and I won't be able to sign up for the before and after school programs.**

\_\_\_\_\_  
Parent's/ Guardians Signature

\_\_\_\_\_  
Date:

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Y'S KIDS 2019 SUMMER

Transportation Plan and Authorization

CHILD'S NAME: \_\_\_\_\_

MY CHILD WILL ARRIVE AT THE PROGRAM:

MY CHILD WILL DEPART FROM THE PROGRAM:

PARENT DROP OFF

PARENT PICK UP

SUPERVISED WALK

SUPERVISED WALK

UNSUPERVISED WALK

UNSUPERVISED WALK

PUBLIC/PRIVATE/VAN

PUBLIC/PRIVATE/VAN

PROGRAM BUS/VAN

PROGRAM BUS/VAN

CONTRACT/VAN

CONTRACT/VAN

PRIVATE TRANS. ARRANGED BY PARENT

PRIVATE TRANS. ARRANGED BY PARENT

OTHER

OTHER

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CHILD'S NAME: \_\_\_\_\_

MY CHILD WILL ARRIVE AT THE PROGRAM:

MY CHILD WILL DEPART FROM THE PROGRAM:

PARENT DROP OFF

PARENT PICK UP

SUPERVISED WALK

SUPERVISED WALK

UNSUPERVISED WALK

UNSUPERVISED WALK

PUBLIC/PRIVATE/VAN

PUBLIC/PRIVATE/VAN

PROGRAM BUS/VAN

PROGRAM BUS/VAN

CONTRACT/VAN

CONTRACT/VAN

PRIVATE TRANS. ARRANGED BY PARENT

PRIVATE TRANS. ARRANGED BY PARENT

OTHER

OTHER

PARENT /GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

REFER TO FIRST AID AND EMERGENCY MEDICAL CARE CONSENT FORM FOR RELEASE INFORMATION





**FOR YOUTH DEVELOPMENT  
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Below is a statement from the Commonwealth of Massachusetts regarding family/child confidentiality regulations pertaining to the use of online networks such as but not limited to "Facebook, Twitter, Instragram".

**THE COMMONWEALTH OF MASSACHUSETTS Department of Early Education and Care Child Care and Placement Licensing CONFIDENTIALITY OF FAMILY POLICY STATEMENT: INFORMATION Number: P-EEC-10**

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All EEC child care and placement licensing regulations contain provisions that protect the information contained in children's records from unauthorized use and from disclosure to anyone not directly involved in implementing the child's program without written consent of the child's parents (See 102 CMR 3.00; 102 CMR 4.00; 102 CMR 7.00; 102 CMR 8.00). The intent of these regulations is to protect the privacy of children and families. Therefore, early education and care and child placement programs and their staff may not distribute, share or discuss information (including photographs or other images) about children and families in their care by any means, whether written or verbal, using any medium, including but not limited to telephone, email or electronic text without the expressed written permission of the child's parents. Images of children, whether or not they are identified by name as well as personal information related to children and their families may not be posted on publically accessible portions of "Facebook", "Twitter" "Snap Chat" or any other similar online directory, social utility or networking website under any circumstance. However images of children and personal information related to children and families may be shared on the restricted, private portions of such websites only with the express written permission of the child's parents. Early education and care and child placement program staff may not discuss children and families in their care with anyone not directly involved in implementing the child's program, including but not limited to other parents in the program, and may not distribute copies of information in a child's record without the expressed written permission of the parents.

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I \_\_\_\_\_ have read and understand the Commonwealth of Massachusetts Policy regarding child and family confidentiality. I understand that Teachers and Program Staff of the YMCA are prohibited from any interaction with parents and guardians of children attending any YMCA program on any online network, such as but not limited to "Facebook, Twitter, Instragram

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**Confidentiality agreement:**

I \_\_\_\_\_ have read and understand the Commonwealth of Massachusetts Policy regarding child and family confidentiality. I understand that the teachers and program staff of the YMCA of Greater Westfield are prohibited from interaction with parents and guardians of children attending any YMCA programs on any online network, such as but not limited to Instagram, Facebook, Twitter.

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**Signature & Date**

**Pick up List:**

**MY child is** \_\_\_\_\_

I \_\_\_\_\_ give the following listed people permission to pick up my child/children from **Summer Y's Kids 2019**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**I also understand that anyone who picks up my child must have an ID with them and sign the child out by seeing the Director first. And someone who is not on my list is not able to pick up my child/children.**

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**Parent Signature:**

**Date:**

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# YMCA of Greater Westfield – School Age Child Care – Summer Form 2019

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

*Last*

*First*

*Middle Initial*

Address \_\_\_\_\_  
\_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ School \_\_\_\_\_

Grade \_\_\_\_\_

Guardian's Name \_\_\_\_\_

Phone # \_\_\_\_/\_\_\_\_/\_\_\_\_  
*Home Work Cell*

Guardian's Name \_\_\_\_\_

Phone # \_\_\_\_/\_\_\_\_/\_\_\_\_  
*Home Work Cell*

Circle Weeks's 6-24, 7-1, 7-8, 7-15, 7-22, 7-29, 8-5, 8-12, 8-19

I hereby give permission for my child, named above, to participate in all activities; including swimming, field trips, sports, etc. I give permission to the YMCA to allow my child to be observed, and to participate in field work conducted by student interns. I give permission for my child to receive first aid on site and to be transported to the hospital if YMCA personnel deem it necessary. I hereby give permission to the physician selected to order X-rays, run necessary tests, and to provide treatment for the health of my child. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected to hospitalize, secure proper treatment for and to order injection, anesthesia, and/or surgery for my child.

I agree to pay the weekly fee, in full the Friday before each week attended. I understand that no refunds are made due to absence. It is understood that if payments are 2 weeks past due the child shall be withdrawn until payments are made current.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date