

YMCA

AFTER SCHOOL PROGRAM

What we provide

- Transportation from school to the YMCA
- Homework help
- Healthy snack
- Fun activities
- All day care on school out days
- All day care on emergency days out

Ask about our Financial Assistance Program
We accept DCFS & West Central Child Care

EXERCISE
LEARN & PLAY
AFTER THE
SCHOOL DAY



Student Info

Student Name: _____

Date of Birth: _____

Grade: _____

Club Y (Kindergarden-3rd Grade)

MASH (4th-8th Grade)

School: _____

Attendance (please circle one):

Full-time (4-5 days)

Part-time (1-3 days)

Monday Tuesday Wednesday Thursday Friday

If your child is not going to attend you must call the YMCA by 2:40pm to let us know that they are not coming or you will be charged for that day.

Cost

After School Price

	Member	Non-Member
Full-time	\$60	\$75
Part-time	\$50	\$63

*Full-time 4-5 days *Part-time 1-3 days

School Out Days (5-13 years old)

Member \$20

Non-member \$25

Lock In Rate

NEW THIS YEAR!

You will be locked in at the full-time or part-time rate. If you have signed up for the full-time rate and only participate part-time **YOU WILL** be charged the full-time rate.

I understand that for the first semester (August-December) of school I will be locked into the rate that I choose below. You will have the chance to switch your rate for the second semester.

___ Full-time (4-5 days)

___ Part-time (1-3 days)

Parent Signature

Child Care Payment Policy

A \$40 activity fee is required to reserve a spot for your child in After School or Summer Camp. Failure to pay the activity fee will forfeit your child's spot. Parents with children in a Child Care program will receive an invoice at the end of each week. The full balance must be paid within 14 days. Any balance not paid 14 days after your registered session will be assessed a \$15 late fee.

Failure to pay fees by the due date will result in your child not being able to participate in the program until all fees are paid. This could result in your child being left in the hands of Quincy Public School officials at time of scheduled pickup.

If you need financial assistance, please apply at the Welcome Desk. Please allow two weeks for processing. Financial assistance is awarded in accordance to your family's financial need and funds available. The YMCA accepts West Central Child Care payments as well.

The YMCA offers a 10% discount if you enroll in automated draft. Automated draft is set up through a debit card, credit card or bank account. The automated draft is taken out at time of billing. The After School draft is scheduled on Fridays and Summer Camp on Mondays.

The new policy will go into effect on January 1, 2018 and is subject to change at any time. If you have any questions please contact Kristen Lay, Program Director at 222-9622, ext. 210 or kristenl@quincymca.net.

Parent Signature

Date

Lets Make it Easy!

You will save 10% each week if you allow the YMCA to automatically take out your payment from a bank account or credit/debit card.

Example:

Full-time After School Non-Member = \$75

\$75 with 10% off = \$67.50

Savings of \$7.50 each week

Savings of \$315 for an entire school year

Please set up automatic payment at the Welcome Desk.

I allow the YMCA to draft my payment as soon as it is posted on Fridays. I understand that my bill may vary due to full-time, part-time & school out days. I will give the Director 7 days notice if I decide to stop auto payment.

Parent Signature

Date

Member Perks

How can I save money and be a part of the Y community?

Member Perks:

Receive a 20% off for multiple children

Receive \$13-\$15 off each week for being a member

Receive a \$5 discount for each School Out Day

Example: Christmas Break = 10 School Out Days

10 days at \$20 member price = \$200.00

10 days at \$25 non-member price = \$250.00

\$50 savings in 10 days!

Membership Cost:

Youth Membership (12 & Under): \$17.50/month

Teen Membership (13-17 years old): \$24.50/month

Family Membership: \$64.50/month

Single Parent Family Membership: \$48.00/month

**SUMMARY OF
LICENSING
STANDARDS
FOR
DAY CARE
CENTERS**

- All swimming pools must be fenced or otherwise inaccessible to children.
- During hours of operation and at all times that children are present there must be a means for parents of enrolled children to have direct telephone contact with a center staff person.

This summary has been developed to assist parents in monitoring the care provided by the day care center.

For a complete copy of the Licensing Standards, write or call

*Department of Children and Family Services
Office of Child and Family Policy
406 East Monroe Street
Springfield, Illinois 62701
Telephone (217) 524-1983*

Licensing Standards for Day Care Centers may also be accessed through the DCFS website: www.DCFS.illinois.gov and following the links to Part 407, Licensing Standards for Day Care Centers. You may also contact your nearest DCFS office.

your complaint and report the results back to you. The day care center is required to provide a copy of its own written policies regarding the operation of the facility to each staff person and to parents of enrolled children.

Staffing

- The day care center must have a qualified child care director on site at all times. The director must be at least 21 years old, have completed two years of college or have equivalent experience and credentials.
- Early childhood teachers must be at least 19 years old, have two years of college or have equivalent experience and credentials.
- School-age workers must be at least 19 years of age and at least five years older than the oldest child in their care. They must have completed one year of college or have the equivalent experience and credentials.
- Early childhood assistants and school-age assistants must have a high school diploma or the equivalent and must work under direct supervision of an early childhood teacher or a school-age worker.
- Student and youth aides must be at least 14 years of age, at least five years older than the oldest child in their care, and must work under direct supervision of an early childhood teacher or a school-age worker.
- Student and youth aides are not generally counted for purposes of maintaining staff/child ratios.
- The director and all child care staff must have 15 hours of in-service training annually.
- All staff must have current medical reports on file and are subject to background checks for any record of criminal conviction or child abuse and neglect.
- A person certified in first aid, including CPR and the Heimlich maneuver, must be present at all times.

- Prescription and non-prescription medication may be accepted only in its original container. The center must maintain a record of the dates, times administered, dosages, prescription number (if applicable) and the name of the person administering the medication.

- Medication must be kept in locked cabinets or other containers that are inaccessible to children.

Nutrition and Meals

- Menus must be posted.
- Meals and snacks must meet nutritional guidelines.
- Children in care two to five hours must be served a snack. Children in care five to 10 hours must be served a meal and two snacks or two meals and one snack. Children in care more than 10 hours must be served two meals and two snacks or one meal and three snacks.

Napping and Sleeping

- Children under six years of age who remain five or more hours must have the opportunity to rest or nap.
- Infants must sleep in safe, sturdy, freestanding cribs or portable cribs.
- Toddlers may use either stacking cots or full-size cribs.
- A cot or bed must be provided for each toddler or preschool child in attendance five or more hours. Each cot, bed or crib must be labeled with the name of the child.

Physical Space

- Infants and toddlers must be housed and cared for at ground level unless special approval has been granted from the Department.
- Indoor space must provide a safe, comfortable environment for the children. Floors and floor coverings must be washable and free from drafts and dampness.
- Toilets and lavatories must be readily accessible to the children.

Infants and Toddlers

- Infants and toddlers must be in separate space away from older children.
- A refrigerator and sink must be easily accessible.
- Toys and indoor equipment must be cleaned and disinfected daily. Safe, durable equipment and play materials must be provided.
- Either the day care center or the parent may provide food for infants not consuming table food. Feeding times and amounts consumed must be documented in writing.
- No food other than formula, milk, breast milk or water may be placed in a bottle for infant feeding. Microwaves are not to be used for bottle warming.
- Children who cannot turn over alone must be placed on their backs.
- The facility must have a clearly defined diaper changing area with the procedures for changing diapers clearly posted. A hand-washing sink must be accessible for hand washing.
- Staff changing diapers must wash their hands and the child's hands with soap and running water after diapering.
- Information about feeding, elimination and other important information must be recorded in writing and made available to parents when the child is picked up at the end of the day.
- Only new cribs manufactured on or after June 28, 2011 must be in place

School-Age Children

- The facility must have a designated area for school-age children so they do not interfere with the care of younger children.
- Clear definitions of responsibility and procedures are to be established among parent, day care center and school when children move to and from school.
- A variety of developmentally appropriate activities and materials must be available for children. Opportunities must be provided to do homework, if requested.

Evening, Night and Weekend Care

- Family-like groups of mixed ages are allowed.
- Staff must be awake at all times and in the sleeping area whenever children are sleeping.
- Each child must have an individual cot, bed or crib.
- An evening meal and a bedtime snack must be served.
- Breakfast must be served to all children who have been at the facility throughout the night and are present between 6:30 a.m. and 8:30 a.m.

Enrollment and Discharge

- Parents must be provided the names, business address and telephone number of persons legally responsible for the program.
- Parents must be provided, in writing, information on the program, fees, arrival and departure policies explaining to the parents and guardians what actions the caregiver will take if children are not pick up at the agreed upon time, and the guidance and discipline policies.
- Parents must complete an enrollment application, which includes, for first time enrollment, providing a certified copy of their child's birth certificate (which will be copied by the center and returned to the parent), emergency numbers, and persons authorized to pick up their child.
- A child may only be released to a parent or other responsible person designated by the parent.
- Daily arrival and departure logs must be kept by the center.

Guidance and Discipline

- Parents must be given a copy of the guidance and discipline policy.
- The following are prohibited:
 - corporal punishment
 - threatened or actual withdrawal of food, rest or use of the bathroom
 - abusive or profane language
 - public or private humiliation
 - emotional abuse, including shaming, rejecting, terrorizing or isolating a child

- "Time-out" is to be limited to one minute per year of age. "Time-out" may not be used for children less than two years of age.

Transportation

- The driver must be 21 years of age and hold a driver's license that has been continuously valid for three years.
- Children must not be allowed to stand or sit on the floor of the vehicle.
- Age appropriate safety restraints must be used when transporting children in vehicles other than school buses.
- The driver must make sure that a responsible person is present to take charge of a child when delivered to his or her destination.

Health Requirements for Children

- A medical report indicating that the child has been appropriately immunized must be on file for each child. Parents are encouraged to be informed about childhood immunizations by going to the following Web site: http://www.state.il.us/dcls/daycare/Childhood_Immunizations.shtml. A tuberculin skin test is to be included in the initial exam unless waived by a physician.
- The medical report is valid for two years for infants and preschool children. Exams for school-age children are required consistent with the requirements of the public schools.
- The center will comply with the Illinois Department of Public Health's Hearing and Vision Screening Codes and the Illinois Child Vision and Hearing Test Act.
- Children aged one to six years must have either a lead risk assessment or a lead screening.
- Water must be freely available to all children.
- Children's hands must be washed with soap and water upon arrival at the center, before and after meals or using the toilet, after wiping or blowing their noses, after outdoor play and after coming into contact with any soiled objects.

Group Size and Staff Requirements:

AGE OF CHILDREN	STAFF/CHILD RATIO	MAXIMUM GROUP SIZE
Infants (6 weeks through 14 months)	1 to 4	12
Toddlers (15 through 23 months)	1 to 5	15
Two years	1 to 8	16
Three years	1 to 10	20
Four years	1 to 10	20
Five years (preschool)	1 to 20	20
School-age: Kindergartners present	1 to 20	30

- Exception: One early childhood teacher and an assistant may supervise a group of up to 30 children if all of the children are at least five years of age.
- Whenever children of different ages are combined, the staff/child ratio and maximum group size must be based on the age of the youngest child in the group.

General Program Requirements

- Parents must be allowed to visit the center without an appointment any time during normal hours of operation.
- Staff must demonstrate respect for each child enrolled regardless of gender, ability, cultural, ethnic or religious differences.
- There must be a balance of active and quiet activity. Daily indoor and outdoor activities are to be provided for children to make use of both large and small muscles.
- In pre-school programs where children receive care for less than three hours per day, outdoor activity is not required.
- Children may not be left unattended at any time.

- Hot and cold running water must be provided.
- Hazardous items must be inaccessible to children.
- Parents must be notified before pesticides are applied, unless in an emergency

- Exits must be unlocked and clear of equipment and debris.

- Drills for fire and tornado must be conducted. A floor plan must be posted in every room indicating the areas providing the most safety in the case of a tornado and the primary and secondary exit routes in case of fire.

- Smoking or the use of tobacco products in any form is prohibited in the child care center or in the presence of children while on the playground or on trips away from the center.

- Play materials must be durable and free from hazardous characteristics.

- The facility may not use or have on the premises any unsafe children's product as described in the Children's Product Safety Act. Lists of unsafe children's products and recalls from 1989 to now are available at: www.idph.state.il.us/webapp/SRSSApp/pages/index.jsp.

- The facility must be cleaned daily and kept in sanitary condition at all times.

- First-aid kits must be maintained and readily available for use.

Outdoor Play Area

- Play space must be fenced or otherwise enclosed or protected from traffic and other hazards. There must be a shaded area in summer to protect children from excessive sun exposure.

- All areas of the outdoor play space must be visible to staff at all times.

- Equipment must be free of sharp points or corners, splinters, protruding nails or bolts, loose or rusty parts, the potential for entrapment and/or other hazards.

- Protective surfaces must be provided under equipment from which a child might fall

Introduction

The Department of Children and Family Services (DCFS) is responsible for licensing day care centers. When a day care center is licensed, it means that a DCFS licensing representative has inspected the facility and the facility was found to meet the minimum licensing requirements. A license is valid for three years. The day care center's license must be posted. It will indicate the maximum number of children allowed in the facility and the areas where children may receive care.

Licensed day care facilities are inspected annually by DCFS licensing staff. If a complaint has been received regarding a violation of the licensing standards of a day care center, a licensing representative will conduct a licensing complaint investigation to determine if the alleged violation should be substantiated or unsubstantiated. Individuals may contact the Day Care Information Line to learn of substantiated violations.

Day Care Information Line 1-877-746-0829

This statewide toll-free information line provides information to the public on the past history and record, including substantiated violations, of licensed day care homes, day care centers, and group day care homes. This number operates Monday through Friday from 8:30 a.m. to 5:00 p.m.

Summary of Licensing Standards for Day Care Centers

The following is a summary of the licensing standards for day care centers. It has been prepared for you so that you may monitor the care provided to your child. This is a summary and does not include all of the licensing standards for a day care center. State licensing standards are minimum standards. If you observe a violation of any of these standards, you are encouraged to discuss your concerns with the day care center operator. In most cases, parents and day care operators are able to resolve the parents' concerns and issues. If you believe the day care operator is not responding to your concerns and may not be meeting state licensing standards, you may make a complaint to the local DCFS Licensing Office or by calling the Child Abuse Hotline at 1-800-252-2873 and stating that you want to make a licensing complaint. A DCFS licensing representative will investigate

CFS 581
Rev. 12/2000

State of Illinois
Illinois Department of Children and Family Services

VERIFICATION OF RECEIPT

I/WE, _____
Please Print Name(s)

parent(s) of _____, hereby certify that I/we have
Name(s) of Child(ren)

received a copy of a summary of licensing standards printed by the Illinois Department of Children and Family Services.

Signature of Parent

Date

Signature of Parent

Date

THIS COMPLETED FORM IS TO BE PLACED IN EACH CHILD'S FILE AT THE DAY CARE FACILITY.

Parental Consents:

I understand that repeat disruptive, abusive, rude, or otherwise inappropriate behavior by my child will result in dismissal from the Summer Camp Program. The Program director will determine when dismissal shall occur. I understand that the YMCA will do its best to refer my child to an alternative if this occurs; however, advance notice of such dismissal from the YMCA is not required.

Parent/Guardian Initials _____

My child has permission to participate in summer Camp daily activities, including but not limited to swimming and field trips. I understand that all YMCA are trained and certified in First Aid and CPR. My child may apply sunscreen or insect repellent (which I provide for my child).

Parent/Guardian Initials _____

Authorizations and Permissions:

I hereby give permission for my child to be physically sound, having medical approval to participate in the activities of the Quincy Family YMCA Summer Camp. This health history is correct so far as I know and the person herein described has permission to engage in all prescribed program activities except noted. I understand the YMCA is not able to provide professionally trained and certified staff to accommodate campers special needs, I certify that my child does not require an aide to attend camp or that I will make arrangements to provide one.

Parent/Guardian Initials _____

I hereby give permission for my child to participate in summer Camp activities and to travel by bus with the YMCA staff. I understand that only licensed and qualified personnel will operate any vehicle to and from Summer Camp activities and that there will be at least one YMCA staff member present at all times.

Parent/Guardian Initials _____

My signature below indicates that I have the legal authority to register the child named on this form and that to the best of my knowledge the information on the application is complete and accurate. I further understand that this is an application and the named child's participation is contingent upon space being available in the program in which I want the child to participate. I also understand that once my application is confirmed, I must complete payment by the deadlines as outlined on the payment form. All necessary forms must be signed and on file with the YMCA prior to my child attending camp. Failure to comply with the above could result in the loss of a reserved space for my child or children.

Signature of Parent/Guardian _____ Date _____

Parent/Guardian Printed Name _____ Child's Name _____

Child's birth certificate and all documents must be present at the time of packet drop off. No packets will be accepted without payment of \$40, payment form completed, all documents signed and filled out, new copy of birth certificate, DCFS licensing signature, photo of your child, and a t-shirt size. Your child's physical can be faxed to the Quincy YMCA attention Summer Camp, fax number 217-222-8596. This application is not complete unless all items are received



CHILD PICKUP

(Use additional sheet of paper if more than 3 people are authorized to pick up child)

I/we authorize _____

Name

Address

Phone

and/or

Name Address Phone

and/or

Name Address Phone

to pick up my/our child when I am/we are unavailable.

Date _____

Signature of parent/guardian

Relationship to child

Date _____

Signature of parent/guardian

Relationship to child

TRIPS, EXCURSIONS, AND PUBLIC PARK FACILITIES

I/we authorize _____ to take my/our child on walking trips, special excursions, and to nearby public park facilities. I/we also authorize the child to ride as a passenger in the vehicle owned or leased by the above-named person(s). I/we understand all such trips are under the supervision of the above-named person(s) and that health and safety precautions are taken in compliance with DCFS standards for licensure.

Date _____

Signature of parent/guardian

Relationship to child

Date _____

Signature of parent/guardian

Relationship to child

SWIMMING

I/we consent to my/our child using the swimming pool of _____
Name of Provider

at _____
Address

Date _____

Signature of parent/guardian

Relationship to child

Date _____

Signature of parent/guardian

Relationship to child

CONSENTS TO DAY CARE PROVIDERS

NAME OF CHILD _____

THESE CONSENTS ARE FOR NON-DCFS WARDS ONLY AND MAY ONLY BE USED FOR DAY CARE SERVICES.

Parent(s) or legal guardian placing the child may sign any or all of the following consents:

EMERGENCY MEDICAL CARE

This authorizes _____
to secure EMERGENCY medical care for my/our child when I/we cannot be immediately reached at the time of emergency. I/we will
be responsible for the emergency medical charges upon receipt of the statement. _____
is the preferred doctor/clinic/hospital.

Date _____

Signature of parent/guardian _____

Relationship to child _____

Date _____

Signature of parent/guardian _____

Relationship to child _____

ADMINISTER PRESCRIPTION MEDICINE

I/we authorize _____
specified in the prescription's directions for administration. _____ to administer prescribed medicine to my/our child as

Date _____

Signature of parent/guardian _____

Relationship to child _____

Date _____

Signature of parent/guardian _____

Relationship to child _____

ADMINISTER OVER-THE-COUNTER MEDICINE (Administer only in accord with the appropriate standards for licensure)

I/we authorize _____
child as specified in written instructions. _____ to administer over-the-counter medicine to my/our

Date _____

Signature of parent/guardian _____

Relationship to child _____

Date _____

Signature of parent/guardian _____

Relationship to child _____

APPLICATION/RECORD OF CHILD INFORMATION

Name of Child _____ Birthdate _____ Sex _____

Address _____

Date Child Received _____ Date Child Left _____

PARENT OR OTHER PERSONS(S) PLACING THE CHILD

Name _____ Name _____

Relation to child _____ Relation to child _____

Home address _____ Home address _____

Phone Number _____ Phone Number _____

Place of employment _____ Place of employment _____

Address _____ Address _____

Phone Number _____ Phone Number _____

Working hours _____ Working hours _____

OTHER PERSON TO NOTIFY IF PERSON PLACING THE CHILD CANNOT BE REACHED

Name _____ Address _____

Phone Number _____ Relationship _____

PHYSICIAN TO CALL IF CHILD BECOMES ILL OR INJURED

Name _____ Address _____

Phone Number _____ Hospital or Clinic _____

PROGRAM

Days per week _____ Hours of care _____

Rate of pay (optional) _____

Signature of parent or other person placing child

Signature of caregiver

Date

A completely filled in form must be kept by the licensee for each child not related to the licensee. Please have this form available at all times to licensing representatives of the Department of Children and Family Services. Contact the Area Office for supplies of this form.

If the child has any of the following, please explain:

Medical problems _____

Physical handicaps _____

Restrictions for play—outdoors _____

Restrictions for play—Indoors _____

Allergies _____

Food likes _____

Food dislikes _____

Fears _____

Does the child take a nap? _____ Time _____ Length _____

Is the child toilet trained? _____

Does the child have special names for objects? (potty, cookies, drinks, etc.) _____

Does the child regularly take medication? _____ If so, what kind and directions _____

If the child is an infant, what are the feeding instructions? _____

Time _____ Amount _____ Temperature _____

Diaper changes: Powder _____ Ointment _____

Other information that will help in caring for the child _____

Comments:

ALL INFORMATION SHALL BE REGARDED AND HANDLED CONFIDENTIALLY

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT
EFFECTIVE 8/01/13

In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the YMCA of the Greater Twin Cities (hereinafter referred to as YMCA) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct or conduct that constitutes greater than ordinary negligence. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume - and bear the costs of - all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

PARENT/GUARDIAN AUTHORIZATION SECTION — TRANSPORTATION/MEDICAL

1. In the event that I/my child need immediate medical attention for injuries received while participating in a YMCA program, I authorize the YMCA staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed.
2. I give permission for myself and/or my child to be transported by the YMCA as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in walking field trips.
3. I also give permission for myself or my child to enter Canada with the YMCA. I also understand that I/my child will need to bring our passport to camp if the trip involves such travel to Canada.
4. I hereby acknowledge that the YMCA will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise.
5. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. The YMCA receives medical information on campers/participants that may need to be shared with medical providers.
6. If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If YMCA staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge the YMCA and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.

GENERAL

1. I hereby release all pictures of myself or my child taken by the YMCA for promotional purposes and programming materials including the YMCA website.
2. I give my permission for the YMCA to administer sunscreen as needed and to change my child's diaper while my child is in their care.
3. I acknowledge that certain sections of this waiver may not apply to me and/or my child, and the programs or activities that we have chosen but agree to be bound by any applicable language.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if the YMCA did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone (____) _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT
(Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian _____ Print Name _____ Date _____