



LINCOLN FAMILY DOWNTOWN YMCA 2019-2020 LEADER IN TRAINING PROGRAM

CHILD'S NAME _____ BIRTH DATE _____ GRADE (2019/20) _____

PARENT'S NAME _____ BIRTH DATE _____ (Required for registration)

ADDRESS _____ CITY _____ ZIP CODE _____

HOME # _____ WORK# _____ CELL # _____

PARENT'S EMAIL ADDRESS _____

PLEASE SELECT CAMP OPTION/DAYS NEEDED. PAYMENTS FOR CAMP MUST BE MADE PRIOR TO THE START OF CAMP.

2019 DATES	MEMBER	NON-MEMBER	2019 - 2020 DATES	MEMBER	NON-MEMBER
<input type="checkbox"/> BUNDLE SEP 30-OCT 04	\$50	\$65	<input type="checkbox"/> FRI DEC 27	\$15	\$20
<input type="checkbox"/> MON SEP 30	\$15	\$20	<input type="checkbox"/> MON DEC 30	\$15	\$20
<input type="checkbox"/> TUE OCT 01	\$15	\$20	<input type="checkbox"/> THU JAN 02	\$15	\$20
<input type="checkbox"/> WED OCT 02	\$15	\$20	<input type="checkbox"/> FRI JAN 03	\$15	\$20
<input type="checkbox"/> THU OCT 03	\$15	\$20	<input type="checkbox"/> MON JAN 06	\$15	\$20
<input type="checkbox"/> FRI OCT 04	\$15	\$20	<input type="checkbox"/> MLK JR DAY JAN 21	\$15	\$20
<input type="checkbox"/> BUNDLE OCT 07-11	\$50	\$65	<input type="checkbox"/> PRESIDENT'S DAY FEB 17	\$15	\$20
<input type="checkbox"/> MON OCT 07	\$15	\$20	<input type="checkbox"/> THU MAR 05	\$15	\$20
<input type="checkbox"/> TUE OCT 08	\$15	\$20	<input type="checkbox"/> FRI MAR 06	\$15	\$20
<input type="checkbox"/> WED OCT 09	\$15	\$20	<input type="checkbox"/> BUNDLE MAR 09-13	\$50	\$65
<input type="checkbox"/> THU OCT 10	\$15	\$20	<input type="checkbox"/> MON MAR 09	\$15	\$20
<input type="checkbox"/> FRI OCT 11	\$15	\$20	<input type="checkbox"/> TUE MAR 10	\$15	\$20
<input type="checkbox"/> VETERAN'S DAY NOV 11	\$15	\$20	<input type="checkbox"/> WED MAR 11	\$15	\$20
<input type="checkbox"/> TUE NOV 19	\$15	\$20	<input type="checkbox"/> THU MAR 12	\$15	\$20
<input type="checkbox"/> WED NOV 20	\$15	\$20	<input type="checkbox"/> FRI MAR 13	\$15	\$20
<input type="checkbox"/> THU DEC 26	\$15	\$20	SUMMER 2020 REGISTRATION INFORMATION COMING SOON		

LIT INFO:

- LEADERS IN TRAINING hours of operation are from 8:30AM to 4:30PM for ages 12 to 17
- Please arrive in comfortable clothes and closed-toed shoes
- Please send a non-perishable lunch and water bottle
- Mandatory training for first time Leaders in Training
- QUESTIONS? PLEASE CONTACT NicholasFernandez@vosymcaorg OR 602.212.6051

I have read understand and agree to adhere to the YMCA child care program Statement of Services payment policies and give the YMCA permission to use photographs of my child in a group setting for YMCA promotional materials

Parent/Guardian's Signature _____

Date _____

Financial Assistance may be available to those that qualify

PAYMENT INFORMATION			Office Use Only
\$	TOTAL DUE (ALL DATES)		DAXKO ID #
\$	TOTAL DUE TODAY		Date In / /
PAYMENT:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK (EFT)	<input type="checkbox"/> CREDIT/DEBIT CARD
			Staff Name