



# YMCA SOMERTON YOUTH CENTER

## 2019 SUMMER ADVENTURES REGISTRATION

235 W CANAL ST SOMERTON 928.627.7024

Child's name \_\_\_\_\_ Birth date \_\_\_\_\_ Grade (Aug 2019) \_\_\_\_\_ Age \_\_\_\_\_  
 Parent's name(s) \_\_\_\_\_ Parent's Birth date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ AZ Zip code \_\_\_\_\_  
 Parent's E-mail address \_\_\_\_\_  
 Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell# \_\_\_\_\_

CHECK (✓)	FEE	WEEK OF	SPLASH CAMP UPGRADE	(✓) TO INCLUDE UPGRADE	REGISTER & PAY BY	AMOUNT PAID <small>(Balance In full)</small>
<input type="checkbox"/>	\$45	May 27-May 31 *	N/A	-	May 24	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	June 03-June 07	SWIM LESSONS	<input type="checkbox"/> \$25	May 31	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	June 10-June 14	SWIM LESSONS	<input type="checkbox"/> \$25	June 07	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	June 17-June 21	SWIM LESSONS	<input type="checkbox"/> \$25	June 14	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	June 24-June 28	SWIM LESSONS	<input type="checkbox"/> \$25	June 21	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	July 01-July 05*	N/A	-	June 28	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	July 08-July 12	SWIM LESSONS	<input type="checkbox"/> \$25	July 5	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	July 15-July 19	SWIM LESSONS	<input type="checkbox"/> \$25	July 12	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	July 22-July 26	SWIM LESSONS	<input type="checkbox"/> \$25	July 19	<input type="checkbox"/> \$ _____
<input type="checkbox"/>	\$45	July 29 - Aug 2	N/A	-	July 26	<input type="checkbox"/> \$ _____

**IMPORTANT:**

- **CAMPERS MUST BE AT LEAST 5 YEARS OF AGE TO AGE 12**
- **All campers must be registered and paid in full by the Friday prior to the start of each week.**
- **Swim Lessons 1pm – 2pm at Somerton Heritage Pool (M, T, W & F)**
- **Closed Monday, May 27th & Thursday, July 4th**

**FEE DUE AT TIME OF REGISTRATION**

\$ \_\_\_\_\_ Total of Prepaid Weeks

\$ 35.00 One Time Summer Registration

\$ 10.00 Camp T-Shirt (Required for Field Trips)

\_\_\_\_\_ **TOTAL**

For Office Use:	
Member # _____	Date Received: / /
Desk Initials: _____	Date Entered: / /
Receipt # _____	Camp Lead Initials: _____

\* All payments are on the bank draft system attached to your debit or credit card account. Payments will be withdrawn weekly on the noted draft dates. Deposits are non-refundable and non-transferable. You are reserving a space for your child. This form contains the weeks you have reserved, your fees, and your payment due dates. There is no credit given for absent days. Your deposit and reserved space will be forfeited if the payment does not clear your account. If your payment is returned NSF for any reason, the items will be re-presented electronically and you will be charged a \$25 processing fee.

- Any registrations received after the draft date (10 days prior to start of each week of camp) will need to be **PAID IN FULL WITH AN ADDITIONAL \$10 LATE FEE** at the YMCA Welcome Center.
- 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 \_\_\_\_\_



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# BEHAVIOR MANAGEMENT GUIDELINES

It is the Y's goal to provide a healthy, safe, and secure environment for all program participants. Children who attend the program are expected to follow the behavior guidelines based on the Y's four core values and to interact appropriately in a group setting.

Behavior Guidelines:

- We will **CARE** for ourselves and for those around us.
- **HONESTY** will be the basis for all relationships and interactions.
- People are **RESPONSIBLE** for their actions.
- We **RESPECT** each other and the environment.

When a child does not follow the behavior guidelines, we will take the following steps:

1. Staff will redirect the child to more appropriate behavior.
2. The child will be reminded of the behavior guidelines and program rules, and a discussion will take place.
3. If the behavior persists, a parent or caregiver will be notified of the problem.
4. The staff will document the situation. This written documentation will include what the behavior problem is, what provoked the problem, and the corrective action taken.
5. Staff will schedule a conference with the parent or caregiver so they can determine the appropriate action to take.
6. Staff will schedule a progress check or a follow-up conference.
7. If the problem persists, staff will schedule a conference that includes the parent or caregiver, child, staff, and program director. The program director will have all documentation and the notes from the previous conferences for review. If subsequent conferences have to be scheduled, a counselor may also be present.
8. If a child's behavior at any time threatens the immediate safety of that child, other children, or staff, the parent or caregiver may be notified and expected to pick up the child immediately.
9. If a problem persists and a child continues to disrupt the program, the Y reserves the right to suspend the child from the program. Expulsion from the program will be considered in extreme situations.

The following behaviors are not acceptable and may result in the immediate suspension of a child for the remainder of the current day and the next day:

- Endangering the health and safety of children or staff, members, and volunteers
- Stealing or damaging Y or personal property
- Leaving the program without permission
- Continually disrupting the program
- Refusing to follow the behavior guidelines or day camp rules
- Using profanity, vulgarity, or obscenity frequently
- Acting in a lewd manner

If any of these behaviors persists, staff may suspend the child a second time before expulsion. Immediate expulsion may occur if a child is in possession of or using tobacco, alcohol, illegal drugs, firecrackers, firearms, or explosives.

## Parent or Caregiver Signature

I have reviewed with my child the Behavior Management Guidelines. I understand and agree to all of the terms presented in this document.

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Parent or caregiver's signature

Date

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Child's signature



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# EMERGENCY INFORMATION

Child's Name:		Date Enrolled:	
Home Address/PO:		City: State: Zip:	Email:
Home Phone:	Date of Birth:	Sex: Male	Female

Mother/Guardian Name:	Home Address:
Cell Phone:	Business Phone:

Father/Guardian Name:	Home Address:
Cell Phone:	Business Phone:

**I authorize the following individuals to collect my child from the facility in case of an emergency or if I cannot be contacted:**

Name:	Telephone:
Name:	Telephone:
Name:	Telephone:
Name:	Telephone:

In case of injury or sudden illness, I request that this individual be called first if parent/guardian is unable to be contacted	Name:	Telephone:
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The following individual(s) may NOT remove my child from the facility:

Name(s):

Custody papers have been provided and are on file in the facility:  Yes  No  N/A

**Medical Information**

Is child allergic to food or other substances?

No

Yes

If yes, describe symptoms, name food or substance to be avoided, and the procedure to follow if reaction occurs.

Is child usually susceptible to infections?

No

Yes

If yes, list precautions that should be taken:

Is child subject to convulsions?

No  Yes

If yes, specify procedure if one occurs:

Is there any physical condition that we should be aware of:

No

Yes

If yes, list precautions that should be taken:

Does child take medication on a daily/weekly basis?

No

Yes

If yes, please list medication and reason:

Additional Comments:

Other special instruction or information we should be aware of concerning your child:

The Emergency Information provided is accurate and complete, front and back, and was provided by:  
(I, Parent/Guardian, will continuously update this Emergency Information form as needed)

Parent/Guardian PRINTED Name:

SIGNED Name:

Date:



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# SWIM AUTHORIZATION

Name of Child: \_\_\_\_\_ Grade/Group: \_\_\_\_\_

Swimming will occur according to the posted swim days per age group.

Children must come to camp with their: • bathing suits • a towel • sun screen \* water bottle  
(All items must be labeled with child's name in a backpack/sling bag – NO Plastic Grocery Bags)

Please send clothes and swimsuits that children can change into independent of adult assistance. Please make sure all items are labeled with the child's name. All clothing should stay in the child's backpack when not being used. If you send your child to camp in their swimsuit, they must bring a full set of clothes to change into after swimming.

My child may participate in swim and pool activities?

- Yes  No

My child knows how to swim and is permitted to take the swim test to be able to swim in the "deep end":

- Yes  No

My child may have sun screen applied by a YMCA staff member?

- Yes  No

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_



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# TRAVEL PERMISSION FORM

R9-3-408.A.1.a-e R9-5-517.A.1

Arizona Department of Health Services  
Bureau of Child Care Licensing

## PERMISSION to transport a child from the Facility or Group Home

My child has permission to be dropped off at or picked up from his/her school, bus stop or another location.

Child's name:	
Name of location where the child will be dropped off and/or picked up:  FIELD TRIPS / SWIMMING POOL / CAMP UPGRADES	
*Beginning date:  MAY 28, 2019  <small>*The time period is not to exceed 12 months, during which permission is given for other trips away from the facility or group home.</small>	*End date:  JULY 26, 2019
Time(s) to be dropped off and/or picked up:	
Special Instructions:  YMCA SUMMER DAY CAMP ADVENTURES	
Parent/Guardian Signature:	Date: