

Child's Name _____ Shirt Size: Youth XS-Adult XL _____

First Last

Sex _____ Home Phone _____ Cell Phone _____ Email _____

Street Address _____ City _____

Birth date _____ Age _____ Grade Entering _____ School _____

Parents(s) or Guardian(s) with whom child lives: _____

Father's Name _____

Place of Employment _____ Work Phone _____

Mother's Name _____

Place of Employment _____ Work Phone _____

The following individuals may pick up my child or be contacted in case of an emergency. (Please make sure all spaces are filled in.) Children will be released only to those names listed **YOU MUST LIST PERSONS WHO WILL BE AVAILABLE TO BE REACHED BY PHONE.** They should be prepared to show picture ID when picking up your child.


Name _____ Relationship _____ Phone# _____

Name _____ Relationship _____ Phone# _____

Name _____ Relationship _____ Phone# _____

The following individuals may **NOT** pick up my child.

Name _____ Name _____

 _____

Parent/Guardian Signature **Date**

Please indicate which Session your child will be attending by checking the appropriate box(es)

<u>Week #</u>	<u>Dates</u>
1	<input type="checkbox"/> 6/02 – 6/06
2	<input type="checkbox"/> 6/09 – 6/13
3	<input type="checkbox"/> 6/16 – 6/20
4	<input type="checkbox"/> 6/23 – 6/27
5	<input type="checkbox"/> 6/30 – 7/03
6	<input type="checkbox"/> 7/07 – 7/11
7	<input type="checkbox"/> 7/14 – 7/18
8	<input type="checkbox"/> 7/21 – 7/25
9	<input type="checkbox"/> 7/28 – 8/01

Please Mark Below

The Richmond Family YMCA receives financial support from the United Way. In order to better report the diversity of our programs, we ask that you supply us with the following information.

Household income:

- Below \$10,000
- \$10,000 - \$14,999
- \$15,000 - \$19,999
- \$20,000 - \$29,999
- \$30,000 - \$59,999
- \$60,000 - \$124,000
- \$125,00 and over

Ethnicity:

- African - American
- Asian
- Native American
- White
- Bi-Racial
- Other _____

**PARENTS STATEMENT OF UNDERSTANDING/CAMP PERMISSION FORM
PLEASE READ AND INITIAL EACH STATEMENT BELOW**

_____ I agree to pay a non-refundable registration fee if my child is not a member AND the first week of camp fees at the time of registration.

_____ I understand that camp fees are due the day of the week in which the child attends, otherwise the child may NOT attend camp. NO EXCEPTIONS.

_____ I understand that camp fees are based on weekly service and will not be prorated.

_____ I agree that I will pick up my child by 5:30pm or earlier and I understand that it is my responsibility to provide alternative arrangements for picking up my child if I am unavailable. I understand that in the event my child is not collected by 5:30 pm, I will be charged a fee of \$1.00 per minute for every minute thereafter. After 5:40pm my emergency contacts will be called.

_____ I understand that my child is to be signed in and out every day by an adult and that I am not to leave my child at camp until a staff or volunteer receives my child and supervises my child.

_____ I understand that my child will not be allowed to leave the program with an unauthorized person. Any person authorized to pick up my child must be listed on this form and present picture ID.

_____ I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff may have no recourse but to contact the police.

_____ I understand that the YMCA is mandated; by state law, to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

_____ I understand that YMCA staff and volunteers are not allowed to babysit or transport children at any time outside of the YMCA program.

_____ I understand that in the event of continued late payments, late pickup of my child, or for any other good cause, the Richmond Family YMCA reserves the right to remove my child from the program.

_____ I further understand that if my child or ward fails to abide by the rules and regulations of the YMCA he or she is subject to removal from the premises of the YMCA and/or removal from participation in YMCA programs and activities without a refund of dues, fees, or other amounts paid to the YMCA.

_____ I understand that the activities that my child or ward will be engaging in while he or she is in or upon the premises of the YMCA summer camp location, using any of its facilities, services or equipment, or participating any YMCA program or activity are inherently risky and potentially hazardous and I, for and on behalf of my child or ward hereby accept full responsibility for, and risk of, any injury to my child or ward or loss or damage to his or her property that may occur as a result thereof.

_____ I hereby grant permission for my child to leave and to be transported to and from the YMCA premises for the purpose of participating scheduled daily activities and planned field trips.

_____ I hereby grant permission for my child to participate in swimming and wading activities offered as part of the summer program.

_____ I hereby give permission to the YMCA to use indefinitely, without limitation or obligation, photographs, film footage, or tape recordings, which may include my child's voice for the purpose of promoting or interpreting YMCA programs and activities.

_____ I hereby indemnify and hold harmless the YMCA and its directors, officers, employees, and agents from all loss, liability, damage, or cost they may incur due to my child's presence in or upon the premises of the YMCA or use of its facilities, services, or equipment or participation in any YMCA program or activity.

_____ I have received and read the 2014 Summer Day Camp Parent Handbook and understand all of its contents.

Parent/Guardian Name

Parent/Guardian Signature

Date