

# YMCA Youth Information Form



\_\_\_ / \_\_\_ / 20 \_\_\_ Date of Registration

T-Shirt Size (circle one please)

YS                      YL                      AM                      AXL  
YM                      AS                      AL                      AXXL

## Child's Information: (Please print legibly)

Child's Name (first/middle/last) \_\_\_\_\_ Name Called \_\_\_\_\_

Male     Female    Birth Date \_\_\_\_\_ Grade (as of 8/25/12) \_\_\_\_\_

School Attending \_\_\_\_\_

Email Address where you would like to receive program updates and information:  
\_\_\_\_\_

Check all that apply to your child, or check "None" for those that don't apply:

- Allergies (type) \_\_\_\_\_  None
- Special circumstances (see back page and provide additional information as necessary)  None

## Family Information: (check parent to contact for payment and other questions)

Mother/guardian's Name \_\_\_\_\_ Employer \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_

Father/guardian's Name \_\_\_\_\_ Employer \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_

Emergency Information In Case of Emergency, please contact the following first:  Mother     Father

Child's Doctor \_\_\_\_\_ Doctor's Phone \_\_\_\_\_

## If Mother, Father, or Guardian cannot be reached, call (these persons are also authorized for pick-up):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_

**Persons not authorized to visit or pick-up my child: (Court Documentation must be attached)**

\_\_\_\_\_

### Alamance County YMCA Annual Giving Campaign

Each year, the YMCA provides Financial Assistance to families that would not otherwise be able to afford our programs. Please check the appropriate box below if you would be willing to give to this campaign

- No, Thank You
- Yes, we will support with a \$25.00 donation
- Yes, we will support with a \$ \_\_\_\_\_ donation

# YMCA Youth Programs Policy

Please read each of the following policies and sign below to indicate your understanding of these policies.

## Program Policies

**Babysitting Policy** - The YMCA strives to employ the very best staff possible in all our program areas. During staff time-off or after they are no longer employed with us, these persons are private citizens and no longer subject to our employment rules and procedures. The YMCA cannot and does not endorse or recommend its present or former staff members as babysitters to any parent or guardian of any child in any of our programs. Any babysitting arrangements with present or former staff of the YMCA is separate and independent from any YMCA program and must be based on independent investigation, responsibility and judgment of the parent or guardian. I agree that the YMCA shall not be responsible and will be held harmless from any claims or liability in connection with such babysitting activities.

**Lost Items** - I understand that the YMCA is not responsible for any personal items lost or stolen at our programs.

**Special Circumstances**- Parents or guardians are required to inform the YMCA in writing, prior to a child's acceptance in a YMCA program, of any special circumstance which may affect the child's ability to participate fully and within the guidelines of acceptable behavior, including but not limited to any serious behavioral problems or special circumstances regarding psychological, medical, or physical conditions.

Upon being informed of such circumstances, the program director may require a conference with the parent(s)/guardian to discuss issues created by these circumstances.

I understand and acknowledge that (i) it is the responsibility of the parent(s)/guardian to make full disclosure to the YMCA of any special circumstances which may affect the ability of my child/ward to participate, as described above; (ii) it is the responsibility of the parent(s)/guardian to inform the YMCA of any requested accommodation believed by the parent(s)/guardian to be necessary and readily achievable for such participation; and (iii) full disclosure of any special circumstance is material to the YMCA's evaluation of the child's/ward's ability to participate and the YMCA's consideration of any requested accommodation.

Please read and check the boxes below concerning waivers and agreements:

- I permit the YMCA to use images of my child as a YMCA program participant in internal and external promotional material. This includes any printed material, broadcast and print advertising, promotional videos and the YMCA website which are produced or published by the YMCA. I also permit the YMCA and/or the media to use images of my child in broadcast and print media news coverage of the YMCA.
- I have received, read and understand all rules, policies and procedures outlined in the Program Handbook I received when registering my child. I understand all policies and procedures concerning non-refundable deposits and cancellations.
- I hereby release and discharge the Alamance County Community YMCA, its agents, volunteers and employees from any and all claims of injury, illness, death, loss or damage that the participant may suffer as a result of participation in enrolled program(s).
- I authorize the Alamance County Community YMCA to draft the payments from my account for my child for any programs they are registered for that require payments to be made on a bank draft. I understand that should any draft not be honored by my bank for any reason, the draft will be re-deposited and a \$25.00 service charge will be added to my account. It is my complete understanding that if I wish to terminate or change my method of payment in any way, I must give the YMCA ample notice as outlined in the Program Handbook I received when registering.

Parent / Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of YMCA Witness \_\_\_\_\_ Date \_\_\_\_\_