

2016-2017 KIDS DAY OUT REGISTRATION FORM- Greensburg YMCA BASE Program

April 12th, 2017 – April 18th, 2017 Greensburg Salem, Hempfield Area & Yough School Districts (KDO & BASE are Closed Friday April 14th in observance of the Holiday)

Registration Forms and Payment Due To Child Care Billing On: Friday 7th BY NOON

E-mail: childcarepayments@gbgymca.org, Fax: 724-837-5006, Call: 724-834-0150

	KDO	KDO	Early Dismissal	Delay Day
	BASE Participants	Non-BASE Participants	BASE Participants ONLY	BASE Participants ONL
First Student Enrolled	\$31 per day	\$35 per day	\$20 per day	\$13 per day
-	are for BASE participants r		nt on the third and any additiona n site availability and Delay Day c site availability.	
outside play. The YMCA electronic devices or toys <u>KDO</u> : 6:45 am to 6:00 pm	is not responsible for any s from home. This is for th n- entry is through the gym rive from BASE sites to 6:0	lost, stolen or damaged item. V ne safety and protection of your nnasium doors. All children mus	th drink; bathing suit and towel; Ve discourage participants from b child's valuables. t be walked in and signed in by ar n YMCA Doors. Payment must be	ringing any type of valuable, adult. <u>Emergency KDO</u> : 6:45
Early Dismissals & Delay	Days are held at the BASE	sites and only available to BASE	participants. Both are based on s	ite availability and ratio.
		RETURN THE BELOW PC	ORTION	
Child's Name:			BASE Site:	
Any allergies or med	lical concerns:			
Dates Of Attendance				
	il 12 th , 2017 (Early D			
	•	MCA Hempfield, Greens		
O Monday April 17	'th, 2017 (KDO at YM	MCA Hempfield, Greens	burg, and Yough)	
O Tuesday April 18	8th, 2017 (KDO at YN	MCA Greensburg, and Yo	ough)	
Payment Options:				
	Must fill out back side	e of form)		
	-	edit Card O Use Bill	ing Information on File	
			Exp. Date:	Three Digit Code:
			Card #:	
Name on Credit Card				
			exed or dropped off at the Gre	

I give the Greensburg YMCA permission to take photographs or videos of my child. Please indicate whether you consent to internal sharing of the photos and or videos, external (marketing) sharing, both or none.

O Internal O External O Both O None

CCIS Participants

(must be filled out and signed for CCIS payment to be received)

I,(parent name) need to switch my child,	
to the Greensburg YMCA main site (6111214023-1) on (KDO DATE)	
they will then resume Care at original site, (school site),	on
(date returning).	

Thank You,

date:_____

(parent signature)