

REMOVE, COMPLETE, AND SUBMIT THIS FORM AT ANY GREATER WICHITA YMCA LOCATION (ymcawichita.org/locations) TO ENROLL YOUR CHILD IN KEY ACADEMY AND/OR FUN CLUB

GREATER WICHITA YMCA KEY ACADEMY

2019-2020 ACADEMIC YEAR ENROLLMENT FORM

MUST complete for EACH CHILD and present form(s) in person at any Greater Wichita YMCA branch location.
 Additional forms and information are available at Greater Wichita YMCA branches or ymcawichita.org/key.

PARTICIPANT'S NAME _____

ID# _____

FUN CLUB (SCHOOL DAY OUT) PARTICIPANT ONLY
 See Page 6 or ymcawichita.org/funclub for more information

SCHEDULE OF SERVICE							2019-2020 WEEKLY FEES					
KEY Session	START DATE ___/___/___	ANTICIPATED TIMES (REQUIRED)	KEY Site: _____	M	Tu	W	Th	F	1-2 days/wk*		3+ days/wk	
									M	CP	M	CP
BEFORE SCHOOL (Breakfast included)	Arrival: _____		(Must be 12-years-old, or younger, to enroll. Unless otherwise noted, student <i>must</i> attend at school where they are enrolled.)						\$30	\$35	\$50	\$55
	Departure: School Day Starts											
AFTER SCHOOL (Snack included)	Arrival: School Day Ends								\$35	\$40	\$55	\$60
	Departure: _____											
BEFORE AND AFTER SCHOOL (Breakfast and snack included)	Arrival: _____								\$45	\$50	\$65	\$70
	Departure: _____											

*must register/pay-for same days each week

I have been awarded Greater Wichita YMCA Child Care and Camp Branch Income-Based Financial Assistance. **REQUIRED** - Rate Reduction ___%

Apply \$5/WEEK SIBLING DISCOUNT to weekly fees. **REQUIRED** - KEY Academy-Enrolled sibling's name: _____

TOTAL WEEKLY FEE (due 10PM CT each Monday prior to the week of service) PAYABLE BY <input type="checkbox"/> AutoDraft <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cash	\$ _____
--	----------

PAYMENT DUE AT ENROLLMENT/REGISTRATION		2019-2020 KEY/FC
ENROLLMENT FEE (\$30/Child NON-REFUNDABLE, NON-TRANSFERABLE Annual Enrollment Fee):		\$ 30
FIRST WEEK OF WEEKLY FEES (Cannot be paid by AutoDraft):		\$ _____
FUNCLUB PAYMENT (NON-TRANSFERABLE):		\$ _____
TOTAL FEES AND PAYMENT DUE AT REGISTRATION PAYABLE BY <input type="checkbox"/> Cash <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Check/Money Order:		\$ _____

TERMS OF AGREEMENT

Your signature confirms your agreement with the following:

- I/We understand that the YMCA reserves the right to dismiss any participant if they or their parent/guardian fails to comply with policies and procedures of the program.
- I/We the below signed person/parent(s) having legal custody/legal guardianship of said minor, give permission for said minor to attend any YMCA program activities supervised by authorized YMCA staff. Said minor is physically able and mentally prepared to participate in all activities, including nutrition and wellness curriculum.
- I/We have read and understand the Parent Information and Policies including, but not limited to: YMCA KEY Academy days, hours of operation, behavior management policies, and information about enrolling a child with special needs. I/We shall abide by said policies and procedures and will review with my/our child prior to participation in the program. Full policies are available at KEY Academy sites and online at ymcawichita.org/key.
- I/We understand that written notice of intent to exit the program is required a MINIMUM OF TWO WEEKS IN ADVANCE. If adequate notice is not given, I/we understand that two weeks of full payment will be billed to my/our account even though my/our child is not in attendance. If I/we choose to return to the program, I/we understand availability is not guaranteed.
- I/We understand that payments for KEY Academy can be made online, via AutoDraft (bank or card autopayment), or at any Greater Wichita YMCA branch. Payments cannot be accepted at the school or KEY location.
- I/We agree to pay the above stated weekly fees by 10PM on the Monday prior to the week of service during my/our child's enrollment in the KEY program. Failure to make timely payments may result in dismissal from the program. A \$10 late payment fee will be applied for each week that a payment is late. All returned drafts/checks will be assessed a \$20/instance charge for returned/refusal to pay items in addition to applicable late/bank fees. A money order may be required for future payments.
- I/We understand that my/our child departs the KEY AM sessions at the school bell and arrives independently to the PM session after school dismissal. My/our child must be accompanied by a parent/guardian upon arrival at AM sessions and must be signed out by an authorized adult from PM sessions.
- I/We release the Greater Wichita YMCA, its staff, and participating school districts from all claims of injury which may be sustained by enrolled child while participating in any YMCA-sponsored activity, whether caused by the negligence of the YMCA or otherwise. If medical attention is required, I give my permission for such medical care.
- I/We do hereby authorize the YMCA and YMCA staff to transport said minor in YMCA bus, van, car, staff car or other vehicle to/from the site for daily transportation and/or field trips, emergency care, etc.

_____/_____/_____
SIGNATURE (Parent, Legal Guardian, Legal Custodian) _____
DATE

IMPORTANT: Retain a copy of this enrollment form and receipt of payment. Weekly fees are based on the above schedule. Fees will not be prorated for absences, in-service days, conference days, holidays, or school cancellations. Find full list of policies, billing information, payment methods and more at ymcawichita.org/key.

PROGRAM FEE AUTODRAFT PLAN

The KEY Academy weekly program fee (draft) amount indicated above will be automatically deducted from/charged to my (check one):

- BANK ACCOUNT (Checking, Savings)
 CARD (Credit, Debit)

This AutoDraft payment plan is a continuous program, however is not designed to exceed the program's end date of ___/___/___.

STATEMENTS OF UNDERSTANDING

I UNDERSTAND THAT:

- If I wish to exit the KEY Academy program and/or discontinue the agreed weekly draft amount before the program's end date (above), I must notify the Greater Wichita YMCA IN WRITING (CHILDCARE@YMCAWICHITA.ORG) TWO (2) WEEKS PRIOR TO THE FINAL DRAFT.
- Should any transfer/AutoDraft not be honored by my provided financial institution/card issuer for any reason I am responsible for that payment PLUS any/all applicable service fees assessed.
- KEY Academy program rates are subject to change and I will be notified, in writing, prior to fee adjustments.
- It is my responsibility to notify the Greater Wichita YMCA of any changes to my above-provided payment method prior to the next weekly AutoDraft of fees.
- It is my responsibility to notify the Greater Wichita YMCA of any changes to my address, phone number, email address, or other provided contact information.
- Enrolled children will be denied KEY Academy/Fun Club access and services until any/all balance(s) due are paid.
- My Credit card information may be updated with "Account Updater Services" offered by Card Networks.
- The voided check provided with this enrollment form is for information purposes only.

PARENT/GUARDIAN/CUSTODIAN INITIALS: _____

Accept my signature below as authorization to begin weekly AutoDrafting of indicated fees.

RELATIONSHIP (CHECK ONE):

___ Parent ___ Legal Guardian ___ Legal Custodian

FOR OFFICE USE ONLY

DATE RECEIVED ___/___/___ SPECIAL INSTRUCTIONS _____
 TIME RECEIVED ___:___ AM / PM
 STAFF INITIALS: _____

_____/_____/_____
 STAFF SIGNATURE _____
 DATE