



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# ST. AGNES Y CLUB AFTER SCHOOL PROGRAM ENROLLMENT 2016-2017

## AFTER SCHOOL

Kindergarten enrollee to 12 years of age

The Y Club program is a great place to be after school with a lot of positive staff interaction and learning opportunities. We provide an after school snack, physical fitness time, homework time, and a wide variety of other activities, including time to socialize with friends and play games.

### Enrollment Information

#### Ways to Enroll

Online Preferred Method *	KansasCityYMCA.org/YClub Full-Time
Walk-In	Youth Development Services 8205 W 108th Terrace, Suite 120 Overland Park, KS 66210
Mail-In	YMCA of Greater Kansas City 3100 Broadway, Suite 1020 Kansas City, MO 64111
Fax	816.931.1847

#### Weekly Fees

Program	Full-Time	Part-Time**
After School	\$80.00	\$71.00
Drop-Ins	Based on availability. Call Youth Development Services at 913.345.9622 for availability and rates.	
Registration Fee	\$75.00	

### Enrollment Dates

- April 22: Full-time enrollment begins for current Y Club families.
- April 29: Full-time enrollment begins for all families.
- June 24: Thanks to the generosity of donors, the Y provides financial assistance to those who qualify. Families must apply for state subsidy before applying for financial assistance from the Y. Families who do not receive state subsidy are eligible to apply for financial assistance. June 24, 2016, is the deadline to apply for financial assistance and have your award begin the first day of school. Financial assistance applications will be accepted after June 24, and awards for those who qualify will be based on availability.
- July 1: Part-time enrollment begins.

### Program Information

- At the time of enrollment, the registration fee plus the first week of payment is due.
- Payments are due weekly and can be paid by electronic draft, online or by check/money order at your school to the YMCA staff.
- Programs are licensed and participate in the child care state subsidy program.
- Financial assistance is available for those who qualify (based on availability.)
- Fees are based on enrollment and not on attendance. Fees are not pro-rated based on the number of days in a week.

#### OUR MISSION

The YMCA of Greater Kansas City, founded on Christian principles, is a charitable organization with an inclusive environment committed to enriching the quality of family, spiritual, social, mental and physical well-being. A UNITED WAY AGENCY

**Program Information, continued**

- Registrations for future start dates require payment for all weeks up to the start date.
- Changes to enrollment are based on availability and are required in writing one business week prior to the effective date of the change.
- Requesting a change from full-time to part-time does not guarantee availability of a part-time spot.
- Withdrawing from the program requires one week's notice in writing on the Change/Drop Request form.
- Because we are committed to protecting your privacy, email registrations are not accepted.

**Program and Administrative Fees**

- A late payment fee of \$20 is charged if your payment is received after the due date.
- A late pickup fee of \$1 is charged per minute per child. Late pickup fees are due when your child is picked up.
- Administrative Fee for enrollment changes: \$25 per request.
- Reenrollment Fee (if your child leaves the programs and returns in the same school year): \$25.

For more information, visit [KansasCityYMCA.org/YClub](http://KansasCityYMCA.org/YClub). For program information, call Youth Development Services at 913.345.9622 or for account information, call the YDS Support Line at 816.360.3390.



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**ST. AGNES  
 Y CLUB AFTER SCHOOL  
 PROGRAM ENROLLMENT  
 2016-2017**

For Office Use Only:

Customer ID	
Signature	Date Processed

Please type or print neatly and complete all sections. Incomplete or illegible registration forms will not be processed.

**Participant Information**

Child's Name	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Grade in School-Fall 2016
Address			
City	State	Zip	
Primary Guardian Name			
Employer			
Primary Phone		Mobile Phone	
Email			
Secondary Guardian Name			
Employer			
Primary Phone		Mobile Phone	
Email			

**Enrollment Information**

Program:  Full-Time After School \$80.00     Part-Time After School \$71.00  
 If Part-Time:  Monday     Tuesday     Wednesday     Thursday     Friday

- Part-time rates apply to care for 3 set days. Part-time care is offered on a limited basis.
- Full-time care is 4 to 5 set days per week.

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Child's Name \_\_\_\_\_  
Last Name First Name

### Payment Information

**PAYER INFORMATION:** A person, other than the primary guardian may pay for the weekly payments. If the person who will be responsible for payments is different than the primary guardian please complete this section. Each account may have one payer. **Splitting balances between multiple parties is not available.**

Payer Name		Payer Phone Number
Address		
City	State	Zip

### Y CLUB WEEKLY PAYMENT OPTIONS

Pay by check/money order at site weekly on Monday     Draft by credit card/checking account weekly on Sunday

**For automatic drafts please select one of the following account options**

Please draft from my card information below     Please draft from my attached VOIDED checking account information

**Registration fee and first week's tuition amount \$ \_\_\_\_\_**

**(Registration WILL NOT be processed without payment. Cash not accepted.)**

### YMCA Annual Campaign

Included is an additional amount to contribute to another youth's participation in Y Club who might not be able to participate without our donation. \$ \_\_\_\_\_

Check # \_\_\_\_\_     Visa     MasterCard     Discover     American Express

Card Account # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiration Date \_\_\_\_\_  
month/year

I understand that the registration fee is non-refundable and non-transferable, except for medical reasons, in which case a doctor's note must accompany a refund or transfer request. I understand that my child may not attend the Y program until the Emergency Information Packet, which includes Enrollment Form, Health History Form and Authorization for Emergency Medical Care Form, is completed and provided to the Y Club at the school they will be attending.

I acknowledge that I have read the Y Club Before and After School Program information sheet.

Payer Signature \_\_\_\_\_ Date \_\_\_\_\_

### FINANCIAL ASSISTANCE

Thanks to the generosity of donors, the Y provides financial assistance to those who qualify. Families must apply for state subsidy before applying for financial assistance from the Y. Families who do not receive state subsidy are eligible to apply for financial assistance. June 24, 2016, is the deadline to apply for financial assistance and have your award begin the first day of school. Financial assistance applications will be accepted after June 24, and awards for those who qualify will be based on availability.

### WAYS TO ENROLL

Because we are committed to your privacy, we do not accept registration forms or payments via email.

#### WALK-IN

Youth Development Services  
8205 W 108th Terrace, Suite 120  
Overland Park, KS 66210  
Phone: 913.345.9622

#### MAIL-IN

YMCA of Greater Kansas City  
3100 Broadway, Suite 1020  
Kansas City, MO 64111  
Support Line: 816.360.3390

#### FAX

816.931.1847