



**FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

# ***AFTER SCHOOL CHILD CARE (ASCC)***

**A GREAT END TO THE DAY!**



## ***PARENT PACKET***

**WASHINGTON 2011-12  
School Year**

**At the YMCA, kids develop character by learning and practicing  
the YMCA's 4 core character values...  
*Honesty, Caring, Respect and Responsibility.***

**YMCA Mission – To put Christian principles into practice through  
programs that build a healthy spirit, mind and body for all.**

**It's the 21st century, and has there ever been a harder time to be a kid? So many choices, so many unhealthy options. Luckily, YMCAs are keeping an eye on tens of thousands of school-age kids during the riskiest hours of the day. At the Daviess County Family YMCA After School Child Care Program you'll find caring staff dedicated to offering a structured program that offers a wide range of learning and enrichment activities that promote the physical, emotional, cognitive, and social development of children.**

**Childcare is a familiar scene for working families. For students who attend the YMCA's After School Child Care program, it's about having fun, learning new games and skills, gaining confidence and making friends. For parents, it's knowing that your child is in a safe, nurturing environment that offers educational, and enriching experiences.**

**In collaboration with the Washington Community School Corporation, the YMCA offers After School Child Care for students in grades K-6. The program meets at North Elementary School with students from all other elementary schools being bussed to North.**

**All children must be picked up at North by 6:00 p.m.**

## Enrichment Program

The YMCA's national character building campaign pledges to incorporate the values of *Caring, Responsibility, Honesty and Respect* as part of all youth services programming. The YMCA seeks to support and strengthen the family unit, help children develop their fullest potential and present programs and services in a positive YMCA environment of safety, support, and care.

While participating in the ASCC program, kids are offered the opportunity to express themselves and participate in a variety of activities such as games, crafts, outdoor and indoor play, study time, movies, special events, special projects and more!

A daily afterschool snack is also served.

## Trained Staff

An integral component of the YMCA's quality programming is staffing. Our staff consists of mature and enthusiastic individuals who help us provide a quality, safe, and enjoyable program. A Criminal History Background Check, Mandatory Drug Test, and a TB Test are required for YMCA employees working with children. We also require all school age program staff to take CPR, First Aid and Child Abuse Prevention trainings.

### PROGRAM COSTS:

- **Registration Fee:** \$30 per child non-refundable.
- **WEEKLY RATES**

#### YMCA MEMBERS

5 DAYS	\$38 First Child	\$33 Additional Children, same family
3 DAYS	\$27 First Child	\$24 Additional Children, same family

#### NON-MEMBERS

5 DAYS	\$48 First Child	\$43 Additional Children, same family
3 DAYS	\$33 First Child	\$30 Additional Children, same family

- **LATE FEE:** Any child picked up after 6:00 pm will be charged \$1 per minute late.
- **EARLY OUT DAYS**

On days when school dismisses early, child care will be available at the YMCA for an additional fee of \$7 for the first child (\$5 for additional children in the same family) Children must be picked up at the Y by 6:00 p.m. (Bring swim suit & towel!)

## **HOLIDAYS & SCHOOLS OUT DAYS**

**CHILD CARE IS AVAILABLE AT THE YMCA FROM 7 AM TO 6 PM**

**Registration and advanced payment are required**

**Bring sack lunch and swim suit & towel!!**

### **COST**

**Members: \$18 per day for first child.**

**\$16 per day for additional children in same family.**

**Non-Members: \$21 per day for first child.**

**\$19 per day for additional children in same family.**

**\*Based on Washington Community Schools Calendar**

## **ASCC FEE POLICY: WEEKLY PAYMENTS ARE DUE ON THE FRIDAY BEFORE THE WEEK OF CARE.**

**Payments made after said Friday are subject to a \$5 late fee. All payments must be made before Wednesday or you will be called and asked to pick up your child.**

**Payments should be made at the YMCA front desk or mailed into the YMCA and received PRIOR TO THE WEEK OF CARE. Payments will not be accepted at the child care site.**

## **FINANCIAL ASSISTANCE**

**Financial assistance is available subject to qualification of personal need, enrollment limitations, and financial resources of the YMCA.**

**Financial assistance from the state voucher program may be available for those who qualify. To apply for the state voucher program contact Career Choices at 257-0137.**

## **CREDIT DAYS**

**We cannot deduct missed days from your fee. Your fee pays only for the direct program operating costs such as staff, snacks, supplies, etc. All of these things must be available to your child(ren). When you enroll, you are reserving the time, space, staffing, and provisions for your child whether or not your child attends.**

## **WITHDRAWING FROM THE PROGRAM**

**Parents/Guardians need to notify the YMCA staff at least 1week in advance when withdrawing from the program.**

### **CHANGE IN SCHEDULE**

Parents/Guardians need to notify the YMCA staff at least 1 week in advance of a change in their child's schedule.

**\*Always call the YMCA to let us know if your child will be absent on a day we are expecting them!**

### **SIGN OUT**

It is very important that you sign your child out of the program every day. This gives us the opportunity to give you any information you may need regarding the program and your child's participation. A child will only be released to persons listed on the enrollment form with proper identification. Please help us keep this information current by updating it as needed.

### **ASCC DISCIPLINE POLICY & PROCEDURES**

YMCA staff are encouraged to use positive reinforcement. When inappropriate behavior occurs discipline will immediately follow the misbehavior.

There are some behaviors or actions that may be cause for *immediate* removal from the ASCC program (1 or more days). *Behaviors such as hitting others, fighting, property damage, or any other act that endangers others, or self will not be tolerated.*

The ASCC coordinator, depending on the nature of the behavior, will decide the level of offense. Parents will receive a copy of written discipline reports. The following are general discipline guidelines for varying levels of offenses:

- 1<sup>st</sup> Offense: Verbal Warning
- 2<sup>nd</sup> Offense: \*Time out during free time or scheduled activity
- 3<sup>rd</sup> Offense: Suspension from the YMCA ASCC program for one to three days
- 4<sup>th</sup> Offense: Suspension from the YMCA ASCC program for one week
- 5<sup>th</sup> Offense: Expulsion from ASCC program for remainder of semester or school year

***\*Time out – Child is seated away from others and is required to be quiet for a given amount of time. A “time out” is an opportunity for a child to take some distance from an emotionally difficult or conflict-filled situation. Time out is not used as a form of punishment but rather as a part of the process of teaching young people and help them gain coping skills.***

**All Children participating in the ASCC program are expected to cooperate in a group setting and obey all rules. Due to the nature of the program, our staffing ratio does not allow for one-on-one supervision for unruly children.**

## **ASCC - PARENT/GUARDIAN/CHILD GUIDELINES**

**Parents have the responsibility to:**

- ✓ Let the YMCA know if their child will not be attending for the day.
- ✓ Observe the rules of the YMCA ASCC program as set forth in the Parent Packet and any additional policy statements.
- ✓ To share their concerns with a staff member if the program is not meeting their child’s needs.
- ✓ Listen to concerns that staff members have about their child’s behavior and to work through an agreeable solution to any problem that may occur.
- ✓ Know about any changes in policy and procedures.
- ✓ Know the discipline procedures for the YMCA ASCC program.
- ✓ Inform the staff if their child has been exposed to a contagious illness.
- ✓ Notify staff of child’s withdrawal at least 2 weeks in advance if possible.
- ✓ Pick children up on time.
- ✓ Replace any equipment that their child is responsible for misusing.
- ✓ Pay fees on time.
- ✓ To keep the child’s enrollment data up to date with changes in phone numbers, addresses, pick-up authorizations, etc.

**Parents’ Rights:**

- ✓ To know their children are in a safe environment where they are free to select from a variety of activities.
- ✓ To know what types of programs and activities are being planned and to provide feedback on the kinds of activities their children enjoy.
- ✓ To know if their child does not report to the program as intended.
- ✓ To know if their child is misbehaving, and to spend time talking with staff concerning a solution.
- ✓ To know when their children will be going any place other than where the program is usually held.
- ✓ To voice special concerns for considerations that are not covered in this packet and to discuss special cases where occasional exceptions may be needed.

### **Child's Rights:**

- ✓ To be cared for in a safe, friendly environment by caring adults in a respectful and consistent manner
- ✓ To participate in a variety of after-school activities
- ✓ To receive help with homework
- ✓ To be offered a daily snack
- ✓ To receive medical attention as needed
- ✓ To be disciplined according to YMCA policy

### **Child's responsibilities:**

- ✓ Notify ASCC staff of homework needs
- ✓ Cooperate in a group setting and obey all rules
- ✓ Demonstrate the YMCA core values of Honesty, Respect, Responsibility, Caring with staff and fellow students

## **ASCC SCHOOL and YMCA STAFF RESPONSIBILITIES**

### **School**

- ✓ Principal should meet with the ASCC Site Coordinator once a month.
- ✓ Should a problem arise, the Principal should contact the site Coordinator or the YMCA Program Director.
- ✓ If the ASCC area is needed by the school during the program's scheduled time, the Site Coordinator should be given at least a week's notice so other arrangements can be made.
- ✓ Cleaning supplies (broom, mop, dust pan, cleaning solution, rags) should be available for use by ASCC.
- ✓ Should a child's behavior in school affect his/her behavior in the ASCC program the Coordinator should be notified before 3:00 pm that day.
- ✓ A gym schedule should be given to the Coordinator, so that gym activities may be planned.
- ✓ Trash will be taken out by the school custodians.
- ✓ School personnel will review disaster, fire and safety procedures with YMCA staff.
- ✓ Provide emergency telephone numbers for key school personnel.

### **YMCA**

- ✓ ASCC Site Coordinator should meet with the Principal once a month.
- ✓ Should a "school related" problem arise, the Coordinator or Program Director will contact the Principal.
- ✓ If for some reason, ASCC will not be using the school facility the Coordinator will give advance notification to the principal.
- ✓ ASCC use areas will be left in a clean and orderly fashion daily. ASCC staff will wipe off tables, sweep excess mess from floor, wipe up any spills and arrange chairs around tables.
- ✓ ASCC will stay in the areas designated by the school.

## PROCEDURES FOR EMERGENCY SITUATIONS

### Plan for Provider Illness or Injury

- If ASCC counselor should get hurt or become ill and a second counselor is not available at the site, the parents or guardians of the children will be notified by the counselor to come and pick their child up.
- If the ASCC counselor should get seriously injured or become seriously ill, the counselor or emergency personnel will call the YMCA who will notify the parents to come and pick up their children at the site, immediately, and a substitute counselor will be dispatched to the site who will not care for the children, but only stay long enough for the parents to arrive. The children's records are located at the site in a marked binder and duplicate records are located at the YMCA in the program director's file cabinet.
- The phone number of the local childcare resource and referral agency who can assist in finding emergency care is 254-0968 OR substitute care may be available at the YMCA or ASCC site if qualified substitute caregivers are available. (Substitute caregivers must meet specified requirements.)

### Plan for Injured Child

If your child is injured during the program, the site coordinator or counselor in charge will take whatever steps may be necessary to obtain emergency medical care. (See Medication and Sudden Illness Procedures). If we cannot contact the parent/guardian, and *if the situation warrants*, we will call an ambulance. A staff member will accompany your child and efforts to contact the parent/guardian or alternate emergency contact person will continue until someone is notified. Upon notification, a responsible party is expected to come immediately.

## **MEDICATION AND SUDDEN ILLNESS PROCEDURES**

- **If medication needs to be administered during the program hours, the medication must be delivered directly from the parent/guardian or school personnel to the Site Coordinator.**
- **Medication must be in the original container.**
- **A completed Medication Request form must accompany the medication and will be kept on file at the YMCA. (Forms are available upon request.)**
- **Only daily doses will be accepted. Medication container must be signed in and signed out daily.**
- **YMCA staff is only allowed to administer basic First Aid – soap & water, band-aids, etc.**
- **If your child falls ill during program times, the Site Coordinator or Counselor in charge will follow these steps:**
  - 1. Attempt to contact parent or guardian**
  - 2. Attempt to contact persons listed as emergency contacts.**
  - 3. If necessary, contact ambulance or paramedic.**
  - 4. If necessary, transport child to an emergency care facility in the company of a staff member.**
- **Communicable Illness – Parents will be called and arrangements must be made to pick up your child.**
- **Lice outbreaks occur seasonally. The YMCA has a nit free policy. Random lice checks may be given by staff members at the director's request.**
- **Each child must have a signed immunization record on file by the first day of ASCC.**

## **ADA Policy Statement**

**The YMCA Child Care Program welcomes all children. To the extent it is reasonably able to do so, The YMCA Child Care Program will provide services to children with disabilities or special needs in the same manner as services are provided for other children of comparable age.**

**Minimal monitoring and extra supervision is reasonable as long as it is not fundamentally different from the responsibilities that all group child-care operators have for the safety and well being of their students. The YMCA Child Care Program is, however, unable to provide one-to-one care for any child except on an intermittent basis, such as injuries, immediate disciplinary issues, and certain personal care needs customarily provided to other children.**

**If it is unclear whether the YMCA Child Care Program can reasonably accommodate the unique needs of a child, we will arrive at a final decision by reviewing the circumstances on a case-by-case basis. Such review will be comprised of most, if not all, of the steps outlined in the YMCA's ADA Policy for Child Care Programs, unless such process would not meaningfully contribute to a final decision.**

**A copy of the Daviess County Family YMCA ADA Policy for Child Care Programs is available in its entirety upon written request.**

## **AFTER SCHOOL CHILD CARE ENROLLMENT**

**To enroll your child in the YMCA After School Child Care Program, complete the following forms, and return them to the YMCA front desk.**

**The \$30 Registration Fee and the First Week's Payment are required at the time of enrollment.**

***Weekly payments thereafter are due on or by the Friday prior to the week of service.***

**THANK YOU!**



# IDENTIFICATION & EMERGENCY INFORMATION

<b>Child's Physician</b> _____ Physician's Address _____ City _____ State _____ Zip _____ Physician's phone # _____ May we call another physician if unable to contact the above? _____
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<b>Mother or Guardian</b> _____ <b>Place of Employment</b> _____ Business Address _____ City _____ State _____ Zip _____ Phone # _____ Ext: _____ Hours _____
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<b>Father or Guardian</b> _____ <b>Place of Employment</b> _____ Business Address _____ City _____ State _____ Zip _____ Phone # _____ Ext: _____ Hours _____
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<b>OTHER PERSONS TO BE NOTIFIED IN CASE OF ILLNESS OR ACCIDENT:</b>
Name _____ Phone # _____ Address _____ City _____ State _____ Zip _____
Name _____ Phone # _____ Address _____ City _____ State _____ Zip _____

**LIST ALL ALLERGIES:**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

**LIST ALL MEDICAL CONDITIONS:**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

**Hospitalization Insurance:**

Name of Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Hospital Preference \_\_\_\_\_

**PERSONS AUTHORIZED TO PICK UP CHILD:**

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Is there any person or persons NOT authorized to pick up child?**

\_\_\_\_\_

\_\_\_\_\_

## PARENTAL/GUARDIAN SIGNATURE PAGE

(All Sections need to be signed)

### Section 1

I have read and understand the YMCA ASCC Discipline Policy and Procedures and have discussed it with my child. Any disruptive behaviors (requiring a “write up”) and resulting discipline will be discussed with parent/guardian.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### Section 2

As parent or guardian of \_\_\_\_\_

I give permission for pictures of my child to be taken and used in the newspaper, photo collection and/or other publicity/public relations media in regard to the YMCA.

Parent /Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### Section 3

I give permission for my child \_\_\_\_\_  
to watch “PG” rated movies.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### Section 4

I give permission for my child \_\_\_\_\_  
to participate in all YMCA ASCC field trips. I realize my child may be transported via school bus, private vehicle, or by walking. Parents will receive advance notice of all field trips.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

YMCA AFTER SCHOOL CHILD CARE

# FINANCIAL AGREEMENT

I have read the YMCA ASCC PAYMENT POLICY and I hereby agree to pay the YMCA the following charges for my child's participation in the Daviess County Family YMCA's After School Child Care program:

**I understand that all weekly payments are due on the Friday BEFORE the week of care and that payments made after said Friday are subject to a \$5 Late Fee. I further understand that there are no refunds for missed days.**

CHILD'S NAME \_\_\_\_\_

Member Status - please circle:    Member            Non-Member

Days child will be attending (minimum of 3 days per week)

Please Circle: M T W R F

Payment per week \$ \_\_\_\_\_

Payment Status: Self \_\_\_\_\_ State Voucher \_\_\_\_\_ Other \_\_\_\_\_

Parent's/Guardian's Name *(please print)* \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### Financial Assistance Policy

Financial assistance in the form of a waiver or reduction of fees are available subject to qualification of personal need, enrollment limitations and financial resources of our YMCA.

**AFTER SCHOOL CHILD CARE AGREEMENT AND  
RELEASE OF LIABILITY STATEMENT**

**I hereby state that my child is physically and mentally capable of safe participation in the YMCA After School Child Care Program. I assume all risks and hazards incidental to the conduct of this program. I also authorize Daviess County Family YMCA staff to obtain medical treatment for my child in the event the parent(s), guardian or emergency contact cannot be reached. This includes permission for YMCA staff to transport child in personal vehicle for emergency medical treatment.**

**Parent or Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**PARENT ACKNOWLEDGEMENT OF UNDERSTANDING**

**I, \_\_\_\_\_, parent/guardian  
(print name)  
of \_\_\_\_\_, have read and fully  
(child's name)  
understand all information contained in the YMCA After School Child  
Care Parent Information and Registration Packet, and do hereby  
agree to abide by all policies and procedures as set forth therein.**

**Parent/Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_