

that parents come to the center and pick up their child within one hour of being called. This is for the health and safety of every child.

The YMCA has adopted a "No Nit Policy". This means that if your child is found to have nits or live eggs, you will need to pick up your child within one hour of being notified. After your child has undergone shampoo treatment dead nits need to be removed from the hair to avoid the possibility of causing another infestation. This can be done with a special comb that is often included in the treatment kit. After completion your child may return to the center.

_____ Initial

Electronics Release (School Age ONLY):

During the school year we will allow children to bring their electronics to be used at appropriate times. Names must be on each item. Children cannot share electronic items.

If electronics are lost, stolen, or broken, the YMCA is not responsible.

In the event that electronics become inappropriate (such as songs with profanity, violent games, or games that are not age appropriate, etc...) staff will remove and hold the game and the privilege will stop.

I (Print child's Name) _____ understand and agree to the above conditions.

Child's Signature _____ Date: _____

_____ Initial

Child Care Policy & Parent or Guardian Permission:

I recognize that participants must follow safety instructions, remain in areas designated by staff, and refrain from behavior that is harmful to ones' self or to others. Failure to comply with program policies will be cause for the child's dismissal without refund of program fees. I approve and I am aware that my child will participate in program activities that involve a degree of risk. I also declare that my child is physically sound, having medical approval to participate in the activities of Newton YMCA. I certify that my child is amenable to discipline and free from habits or attitudes which would make him/her an undesirable participant. Recognizing that the Newton YMCA will do it's best to ensure a safe experience; I release the Newton YMCA from any and all responsibility and liability of any injury resulting from my child's participation. The YMCA and staff will not be held responsible in the event of an accident.

My signature below indicates that I have the legal authority to enroll my child named on this form and that to the best of my knowledge the information on this application form is complete and accurate. I have read the parent handbook and understand all policies and procedures for the Newton YMCA. I further understand that this is an application and my child's participation is contingent upon space being available in the program(s) and that, furthermore all necessary health, security, and waiver forms must be signed and on file with the YMCA prior to my child attending the program. Failure to comply with the above could result in the loss of space.

Parent/Guardian Signature _____ Date: _____