

Full Name:				
Child's Physical Address:				
amily Email:				
Child's School Information:				
	School Name			Grade Entering
CCPS Student ID *School ca	mpsites required.			
*Please note: we must have a Guardian DOB (required Mother's Name:	for system record	ds):		
Guardian DOB (required	for system record	ds):		
Guardian DOB (required Mother's Name:	for system record	ds): Father's Name:		
Guardian DOB (required Mother's Name:	for system record	father's Name: Address:		
Guardian DOB (required Mother's Name:Address:Home/Cell Phone:	for system record	Father's Name: Address: Home/Cell Phone:		
Guardian DOB (required Mother's Name:Address:Home/Cell Phone:	for system record	Father's Name: Address: Home/Cell Phone: Employer: Work Phone:		
Guardian DOB (required Mother's Name:Address:	for system record	Father's Name: Father's Name: Address: Home/Cell Phone: Employer: Work Phone: Both	Other	

Camp Attending:___

Discipline Policy

Our discipline policy is based on recognizing and providing positive reinforcement for appropriate behaviors and natural or logical consequences as a response to less desirable ones. We believe that children truly want to learn how to behave in an appropriate manner. Our job is to help them learn this by serving as role models and guides. Our discipline policy is designed to be effective in a variety of situations and is based on the following components: Consistency, Emphasis on the positive, Logical consequences, Response. *We will never use any type of physical punishment. Nor will we shame, scold, or humiliate children. *The YMCA reserves the right to dismiss a child from the ASPIRE/YREADS program if repeated efforts at modifying misbehavior have failed and/or if parents are not cooperating with our policies. *** Please note: Any child who runs away from his/her group, will be terminated from the program immediately.

Liability Release:

I give permission for my child to participate in Youth Development at the YMCA. I understand that even when reasonable precaution is taken, accidents can sometimes happen. I hereby acknowledge that I am releasing the YMCA as well as its staff members and volunteers from all liability due to injury, loss, or damage, which may occur on the YMCA property while my child participates in the activities of this program. By registering I acknowledge that I have read and understand, and voluntarily agree to this authorization and release.

Emergency Contacts	<u>5:</u>		
	ly to the custodial parent or legal of		
	d are authorized to remove the ch		
emergency, it for some r	eason, the custodial parent or lega	ai guardian cannot be reac	nea.
Name	Relationship to child	Work #	 Home #
Name	Relationship to child	Work #	Home#
Name	Relationship to child	Work #	Home #
Tuition Payments			
	he scheduled attendance days.	Due to limited spaces,	no child's spot is
	d each week. Spots are on a		
	e is available), payment must l	oe made in advance. Pa	yment must be paid in
advance for all payme			
	I program fees are non-refues resulting in cancellation of		
or any circumstance	s resulting in cancenation of	n programs or compo	ments within.
Hours of operation:			
	y thru Friday. Hours will vary d		
	ere is a late fee charge of \$1 pe		
closing hours. Multiple	e (more than three) late pick-up	os will result in terminat	ion from the program.
Field Trips:			
	sites field trip and activities ca	lendar for all scheduled	trips. All campers MUST wear
			ated time. If a child misses the
	y will not be permitted to stay		
have limited spaces in	every group). Refunds or syst	tem credits will NOT be	given for missed field trips.
Signature:		Date	:
	(please circle yes or no)		
	ng in the YMCA pool: yes	no	A
	llant may be used on my child at saken of my child to be used for pro		
	ree or reduced lunch through CCP:		3. yes 110
I authorize the CCPS sch	ool my child attends to release inf	ormation to the YMCA Sch	
Program, including but n	ot limited to grades, test scores, b	ehavioral records, IEP info	ormation student ID number, etc.:
	oate in Express Parking Pick-up	(by choosing "yes", I und	derstand that there is a \$5.00
charge for the car tag (fi	rst tag free if paying for full summ	er option), and I may pur	chase more if I choose to do so
	understand that by participating		
	the designated parking area, hang I to be dismissed straight to the ve		
	videntification for pick-up): yes		release my child to the vehicle
By cigning holow I also	acknowledge that I have read	oived and agree to abide	by all the policies within the
	acknowledge that I have read, rec th by YMCA of Collier County. Add		
for YMCA of Collier Coun	ty integrate academic and healthy	living components into the	eir programs. I authorize the
-	sults, and outcomes as a result of t	those components and to	use for any reporting purposes
needed.			
Signature	Pri	nt Name	Date

Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in YMCA Programs, now or any time in the future. Acknowledgment of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge, and agree that participation in YMCA activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with YMCA participation, including but in no way limited to: (1) slips, trips, and falls, (2) aquatic injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with YMCA participation and that said list in no way limits the operation of this Agreement.

Coronavirus / COVID-19 Warning & Disclaimer

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in YMCA programs or accessing YMCA facilities could increase the risk of contracting COVID-19. The YMCA in no way warrants that COVID 19 infection will not occur through participation in YMCA programs of accessing YMCA facilities. Waiver, Release, Indemnification & Covenant Not to Sue In consideration of 's participation in YMCA, I, the parent/quardian of the minor named above, agree to release and on behalf of myself and the minor named above, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE the YMCA of South Collier, its officers, directors, employees, volunteers, agents, representatives and insurers ("Releasees") from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against the YMCA on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of YMCA facilities/equipment or participation in YMCA programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In consideration of the named minor's participation in the YMCA, I, the undersigned parent/guardian of the named minor, agree to INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to the named minor's YMCA participation.

I hereby certify on behalf of myself and the named minor that I have full knowledge of the nature and extent of the risks inherent in YMCA participation and that I, on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, the named minor sustains while participating in the YMCA and that by signing this agreement I, on behalf of myself and the named minor, HEREBY RELEASE Releasees of all liability for such loss, damage, or death. I further certify that the named minor is in good health and has no conditions or impairments which would preclude his/her safe participation in the YMCA.

Participant Name (Print Clearly)	Date
Parent/Guardian Signature Parent/Guardian	Name (Print Clearly)