



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

THE PLACE TO BE BEFORE AND AFTER SCHOOL Y TIME



The Y makes strengthening our communities our cause. Through affordable childcare, we create a safe, nurturing environment engaging children, helping them to learn, grow and develop skill sets that will serve them throughout their lives.

As a Y-Time participant, your child will experience academic support, self-esteem building and character development with the staff, but there is much more you should know about us, like:

- We're open **before and after school**, all school year (**fog delays, snow days, no school and 1/2 days too!**)
- We're available to all children Young Kindergarten – 5th grade.
- We keep children engaged with enriching academic activities, creative play and games.
- We encourage healthy eating habits, physical activity and provide nutritious snacks.
- We offer homework assistance (during the school year.)
- Our staff serve as mentors to make Y-Time fun and safe.
- The YMCA Core Values of Caring, Honesty, Respect and Responsibility are always promoted through all activities.

Hours of Operation

- Before School hours: 6:30 am–start of school, Monday—Friday
- After School hours: Close of school to 6:00 pm., Monday—Friday
- Spring Break, Winter Break and Summer require separate registrations.

**Please call Marci
McCoy PRIOR to
registering.
269-945-6148**

Location

Y-Time Child Care is housed at Northeastern Elementary School in Hastings. Barry County Transit provides transportation from Star, Southeastern, Central Elementary and the Middle school during the school year only. *During the school year, parents whose children attend schools other than Northeastern may contact the Hastings Area Schools Bus Garage at 948-4418 regarding transportation to Y-Time.

All Non-Recurrent Families	\$50 Registration fee-good for current year for the family
Discount	10% for each additional child
Before School	\$150 a month per child
Full Time After School	\$235 per month per child
Full Time Before & After School	\$285 per month per child
Fog Delays, Snow Days, No School & 1/2 Days	These days are now added into the monthly pricing
For other schedules and pricing please call Mrs. Marci at Y-TIME Phone: 269-945-6148	

PAYMENTS: Parents are asked to set up an account online and make all payments in our "CampBrain" system. To access CampBrain, visit our website, www.ymcaofbarrycounty.org and click "register."

FINANCIAL ASSISTANCE:

- Children who qualify for DHS (Department of Human Services) Financial Assistance, Y Time Childcare is a qualified provider. Please contact your caseworker to apply and set up payments.
- Additionally, Financial Aid is available through the YMCA, please contact our office, 269-945-4974.

TO REGISTER: Please call Marci McCoy PRIOR to registering to ensure there is availability. 269-945-6148

Submit Registration, Deposit and Completed Paperwork

- ONLINE:** www.ymcaofbarrycounty.org and click on "Youth"
- MAIL/DROP IN:** Use the form on the back of this flyer and mail to the YMCA or to one of our drop box locations
- Mailing address:** YMCA of Barry County, PO BOX 252, Hastings, MI 49058
- Y Drop Boxes:** Family Fare in Hastings, Hastings Community Rec. Center, and outside the YMCA office.
- IN PERSON:** YMCA of Barry County Office
2055 Iroquois Trail, Hastings
Office Hours: 9:00 AM – 4:00 PM
YMCA Phone: 269-945-4574

Enrollment Checklist	
<input type="checkbox"/>	1. Y Time Enrollment/ Payment Agreement
<input type="checkbox"/>	2. Child Information Record
<input type="checkbox"/>	3. Immunization Record
<input type="checkbox"/>	4. Statement of Health & Activity Restriction
<input type="checkbox"/>	5. Parent Handbook Acknowledgment
<input type="checkbox"/>	6. Electronic Policy
<input type="checkbox"/>	7. Code of Conduct
<input type="checkbox"/>	8. Payment Account Set Up In CampBrain

**Y TIME ENROLLMENT/PAYMENT AGREEMENT**

Location: Northeastern Elementary School

START DATE _____

Child 1 Name _____ Gender _____ Date of Birth _____ Age _____

Allergies/Restrictions _____

Child 2 Name _____ Gender _____ Date of Birth _____ Age _____

Allergies/Restrictions _____

Child 3 Name _____ Gender _____ Date of Birth _____ Age _____

Allergies/Restrictions _____

Family Address _____ City _____ State _____ Zip _____

Does the address above belongs to (circle one): Both Parents Mother Only Father Only Other: _____

Mother/Guardian's First/Last Name _____ Cell: _____

Preferred Email: _____ Work#: _____

Father/Guardian's First/Last Name _____ Cell: _____

Preferred Email: _____ Work#: _____

STEP Parent's First/Last Name _____ Cell: _____

Emergency Contact Name/Phone _____

WEEKLY SCHEDULE

Please fill in the days/times (start & end) needed

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

MONTHLY TUITION RATE

Child 1 \$ _____

Child 2 \$ _____

Child 3 \$ _____

MONTHLY TUITION \$ _____**FEES:**

- Each additional child, after the first, is eligible for a 10% discount off FULL TIME RATE ONLY
- Fees are to be paid monthly on the Y's Campbrain account system
- Other payment arrangements can be made with the Child Care Director for other than full time

I agree:

1. I have received a copy of the Parent Handbook. I have read and agree to all the policies and procedures outlined in the Parent Handbook.
2. For before school care, I will sign my child in daily. For after school care, I will sign my children out daily.
3. I understand that this agreement may be changed or cancelled with 2 full weeks written notice.
4. I understand that tuition rates may change with 2 full weeks written notice.
5. I agree to pay \$ _____ monthly.
6. I am aware that the center maintains a licensing notebook that contains reports from all licensing inspections, renewal inspections, special investigations, and corrective actions plans and I may review this material at any time. In addition, I may find this information on the licensing website at www.michigan.gov.

I am the parent or legal guardian of the child/ren I am enrolling and understand that it is my responsibility to keep all information, authorization, required forms, and health records pertaining to my child/ren, current and up to date.

I hereby give my permission for my child to participate in YMCA programs. I assume all risks and hazards incidental to such participation, including transportation to and from activities. I give my permission for the YMCA staff to take my child for emergency care in case of sudden emergency or if I cannot be reached at that time. I do hereby waive, release, absolve, indemnify, and agree to hold harmless the YMCA of Barry County, or organizers, sponsors, supervisors, and participants. I also hereby give my permission to use photos, video or any other media record of my child's participation for any lawful purposes.

Printed Name _____ Signature _____ Date _____