



YMCA of Columbia-Willamette SCHOOL AGE PARENT CONFIRMATION AND AGREEMENT

Complete the information below. Refer to the program rate sheet for package description and hours of operation.
Please return this form to the Program Office.

PARTICIPANT INFORMATION					
YMCA PROGRAM SITE		SCHOOL CHILD ATTENDS		START DATE	
CHILD'S NAME			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH	GRADE IN FALL
SECOND CHILD'S NAME			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH	GRADE IN FALL
ADDRESS		CITY	STATE	ZIP	
FIRST PARENT'S/GUARDIAN'S NAME		HOME PHONE		PAGER/CELL	
ADDRESS (IF DIFFERENT FROM CHILD'S)		CITY	STATE	ZIP	
EMPLOYER			WORK PHONE		
ADDRESS		CITY	STATE	ZIP	
E-MAIL ADDRESS			MAY WE CONTACT YOU BY E-MAIL? Y <input type="checkbox"/> N <input type="checkbox"/>		
SECOND PARENT'S/GUARDIAN'S NAME		HOME PHONE		PAGER/CELL	
ADDRESS (IF DIFFERENT FROM CHILD'S)		CITY	STATE	ZIP	
EMPLOYER			WORK PHONE		
ADDRESS		CITY	STATE	ZIP	
E-MAIL ADDRESS			MAY WE CONTACT YOU BY E-MAIL? Y <input type="checkbox"/> N <input type="checkbox"/>		
EMERGENCY CONTACT(S) OTHER THAN PARENT(S) AUTHORIZED TO PICK UP CHILD(REN)					
NAME		PHONE		RELATIONSHIP	
ADDRESS		CITY	STATE	ZIP	
NAME		PHONE		RELATIONSHIP	
ADDRESS		CITY	STATE	ZIP	

PLEASE CHECK DAYS AND INDICATE TIMES YOUR CHILD(REN) WILL BE ATTENDING.									
<input type="checkbox"/> MONDAY		<input type="checkbox"/> TUESDAY		<input type="checkbox"/> WEDNESDAY		<input type="checkbox"/> THURSDAY		<input type="checkbox"/> FRIDAY	
1ST CHILD	2ND CHILD	1ST CHILD	2ND CHILD	1ST CHILD	2ND CHILD	1ST CHILD	2ND CHILD	1ST CHILD	2ND CHILD
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AM		AM		AM		AM		AM	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
EXT. KG		EXT. KG		EXT. KG		EXT. KG		EXT. KG	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
PM		PM		PM		PM		PM	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

am = care from 6:30 am until school starts for the primary grades
 ext. kg = care from the time the am kindergarten class is dismissed until the primary grades are dismissed
 pm = care from the time of primary dismissal until 6:00 pm (6:30 at some locations)

CHECK THE PACKAGE OPTION YOU ARE REQUESTING (PLEASE REFER TO RATE SHEET FOR PACKAGE DESCRIPTIONS.)			
1ST CHILD:	<input type="checkbox"/> BASIC/LEVEL 3	<input type="checkbox"/> SCHOOL YEAR/LEVEL 2	<input type="checkbox"/> YEAR ROUND/LEVEL 1 – BEST VALUE
2ND CHILD:	<input type="checkbox"/> BASIC/LEVEL 3	<input type="checkbox"/> SCHOOL YEAR/LEVEL 2	<input type="checkbox"/> YEAR ROUND/LEVEL 1 – BEST VALUE