



**Sussex YMCA**  
**Blairstown**  
 Before & After School Program  
 Registration Form  
 2018-2019 School Year

**School:** Blairstown

**Child:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_ **Gender:** F M

**Grade as of 9/1/18:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**Before Care:** Mon Tues Wed Thurs Fri

**After Care:** Mon Tues Wed Thurs Fri

Please circle days needed (2-day minimum per program)

**Please return this completed form to the Sussex YMCA to register for the School Age Child Care Program for the 2018-2019 school year. Please update any incorrect information.**

<b>PARENT/ GUARDIAN #1</b>	<b>Member#:</b>
Name: _____	Birthdate: _____
Address: _____	Email: _____
_____	Home Phone: _____
City, State Zipcode	Work Phone: _____
Employer: _____	Cell Phone: _____

<b>PARENT/ GUARDIAN #2</b>	
Name: _____	Birthdate: _____
Address: _____	Email: _____
_____	Home Phone: _____
City, State Zipcode	Work Phone: _____
Employer: _____	Cell Phone: _____

**EMERGENCY CONTACTS:** These persons will be authorized to pick your child up at any time and must be able to arrive within one hour in case of emergency. Please provide 3 options.

Name	Relationship	Phone#1	Phone#2

<b>Allergies / Medications:</b>	<b>Who may NOT pick up your child?</b> Please provide supporting documentation. Name: _____ Name: _____
<b>Special Needs:</b>	<input type="checkbox"/> Permission granted to use photographs/video of my child in YMCA publicity <input type="checkbox"/> No photos or videos permitted of my child Signature _____

For additional information, including fill-in enabled forms, please go to our website:  
[www.sussexcountyyymca.org](http://www.sussexcountyyymca.org)

# Sussex County YMCA: Blairstown Elementary School Grades K - 6

**Monthly Tuition: 2018-2019 School Year**

	Before Care 6:30 - 8:25am <b>Monthly Tuition</b>	After Care 3:15 - 6:00pm <b>Monthly Tuition</b>	Before & After Care <b>Monthly Tuition</b>
5 Days/week	\$170	\$250	\$395
4 Days/week	\$150	\$230	\$375
3 Days/week	\$130	\$190	\$315
2 Days/week	\$100	\$145	\$240

**Sibling Discount:** A 10% discount reduction will be applied to the lesser tuitions for those families having more than one child participating in any Metro YMCA child care programs.

**Financial Assistance** is available to those who qualify. Please complete a Financial Assistance (F/A) application and submit it with your registration for the Before/After School program. All F/A applications must be received in our office by **July 14th**. Applications are available at our website: [www.sussexcountnymca.org](http://www.sussexcountnymca.org)

- All registration forms must be returned with payment of the first month's tuition, one month's security deposit, the \$35 registration fee, and the membership fee.
- Registration is not considered active until **payment** and **completed paperwork** is received. If space is still available, parents intending to have their child attend the program on the **first day of school** must hand in **ALL** registration paperwork no later than August 14th.



**The following documents (available on our website) must be received to process your registration:**

- Registration Form
- All Fees
- Medical Release Form
- Parent Agreement

Please send all completed paperwork and fees to:

**Sussex County YMCA  
Attn: SACC Registrar  
15 Wits End Road  
Hardyston, NJ 07419**

## REGISTRATION FEE SUMMARY

\$	<b>Annual Program Membership Fee</b> \$85 Youth                      \$155 Family
\$	<b>Registration Fee: \$35</b> Waived if registering before 6/30/2018
\$	<b>First Month's tuition</b> (less 10% sibling discount if applicable)
\$	<b>Security Deposit: equal to one month's tuition</b> (less 10% sibling discount if applicable)
\$	<b>TOTAL DUE</b> at Registration

- Checks payable to Sussex County YMCA.**
- Payment by Visa, Amex, MC, or Discover**

Name on Card: \_\_\_\_\_

CC#: \_\_\_\_\_

Exp Date: \_\_\_\_\_

Signature: \_\_\_\_\_

I am applying for Financial Assistance with:      YMCA                      Norwescap