



Bergen County

VACATION DAY PROGRAM REGISTRATION FORM

On the dates listed below, the YWCA SAP will run a full day program from 7:30am-6:30pm during the school vacation. The program will consist of a field trip and organized recreation activities and is open to children from all YWCA before and after school programs, as well as children not currently enrolled in our programs. It is staffed by YWCA employees from a variety of before and after school sites. **Children must arrive to the YWCA by 8:30am.**

The program is held at the YWCA,
112 Oak St. ▪ Ridgewood, NJ ▪ 201- 444-5600

Advanced registration, is required and all fees must be paid by check/ credit card. No refunds are available for cancellation for any reason. **Your account must be in good standing to register for the vacation day program. Any family with past due balances will not be permitted to register for the vacation day programs.**

ALL FORMS ARE DUE BACK TO Mary Agnello, magnello@ywcabergencounty.org by Tuesday, February 6th, 2018 at 12 (noon)

Any form not received by the above deadline cannot be guaranteed and will be charged a late fee of \$25

<p><u>Friday, February 16th</u> Color Me Mine Ridgewood, NJ</p> <p>Time at facility: 9:30am-11:00am Includes: transportation, one ceramic item to paint, pizza & drink</p> <p>Aqua Adventures 1:30pm-2:30pm Swim time at the YWCA pool Children must bring a bag with: bathing suit, towel, goggles & flip flops</p>	<p><u>Monday, February 19th</u> Hawthorne Movie Theater Hawthorne, NJ Movie- Peter Rabbit</p> <p>Time at facility: 10:00am-1:00pm Includes: transportation, popcorn, drink **Children may bring extra money to purchase additional snacks at the theater**</p> <p>*BROWN BAG LUNCH REQUIRED* Aqua Adventures 1:30pm-2:30pm Swim time at the YWCA pool Children must bring a bag with: bathing suit, towel, goggles & flip flops</p>	<p><u>Tuesday, February 20th</u> Rizzo's Wildlife World Roxbury, NJ</p> <p>Time at facility: 10:30am-1:30pm Includes: transportation, wildlife presentation, educational animal stations</p> <p>*BROWN BAG LUNCH REQUIRED*</p>
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Before/ After School Site: _____

I give permission for my child _____ to attend the YWCA vacation day field trip and understand my child will be transported by the YWCA to and from each activity. Child date of birth ____/____/____
 My child has an allergy to _____. **Parents must supply an Epi-Pen or required allergy medications.**

If parents are divorced/separated, please give specific instructions and a copy of court order concerning visits and pick-up by non-custodial parent. **Are there restrictions on pick-ups or visitation** NO YES

Parent Signature: _____ **Date:** _____

- Friday - February 16th, 2018 -Color Me Mine / Aqua Adventures- \$90.00
- Monday - February 19th, 2018 -Peter Rabbit / Aqua Adventures- \$90.00
- Tuesday - February 20th, 2018 -Rizzo's Wildlife - \$90.00
- LATE FEE (if applicable) - \$25.00

CREDIT CARD AUTHORIZATION Visa Master Card Discover American Express Check

Name as it appears on card: _____

Billing Address for this card: _____

Amount to charge: \$ _____

Card number: _____ Expiration date: _____ Security Code: _____

I hereby authorize the YWCA of Bergen County School Age Program to charge my credit card.

Check Number: _____

Signature: _____ Date: _____

**YWCA Vacation Day Program
Registration form 2017-18**

Child's Name _____ **Date of Birth** _____ **Age** ____ Male Female

Address _____

Name of School _____ **Grade 2016-17** _____

family information / communication

Mother / Guardian Name _____ Date of Birth _____
Home Phone _____ Work Phone _____ Cell Phone _____
Employer _____ Email Address _____

Father/Guardian Name _____ Date of Birth _____
Home Phone _____ Work Phone _____ Cell Phone _____
Employer _____ Email Address _____

Do parents live together? _____ **If no, with whom does the child reside?** _____

If parents are divorced / separated, please give specific instructions and a copy of court order concerning visits and pick up by non-custodial parent. Are there restrictions on pick-ups or visitation? No Yes – court order attached

Emergency information / release to pick up children (other than parents)

If I am unable to pick up or be reached regarding important matters pertaining to my child, I authorize these people to pick up my child or answer questions

Name _____ Relationship _____ Ok to pick-up Emergency info
Daytime Phone _____ Work Phone _____ Cell _____

Name _____ Relationship _____ Ok to pick-up Emergency info
Daytime Phone _____ Work Phone _____ Cell _____

Date of last Physical Exam: _____ **Any Medical Issues/ Allergies?** No Yes, describe

If your child has allergies requiring medical treatment – you must send a care plan from your doctor.

Any Learning / Behavioral issues? No Yes, describe _____
A copy of latest IEP would be appreciated

YES, I have access to a copy of the parent handbook, which includes the Management of Communicable Diseases, Expulsion / Discipline Policy, Release of Children Policy, Medication Policy, and the **Information to Parents from the Bureau of Licensing in the Division of Family and Youth Services (DYFS)** (available online at www.ywcabergencounty.org). I understand it is my responsibility to read all the policies and I have read this entire application and I agree to abide by all terms and regulations.

YES, the child named on this contract is in good health and is able to fully participate in all activities offered at the YWCA program. In an emergency, when either I or the emergency contact above cannot be reached, I hereby give permission for the YWCA to take any action deemed necessary for the best interests of my child. I also give permission for any medical personnel selected by the camp to provide needed care including any resuscitation efforts and emergency room care.

Parent Signature _____ **Date** _____