



Child's Name _____
Grade (Fall 2023) _____
Site/School _____

2023-2024 Before/After School Enrichment & Holiday Care

55 PA CODE CHAPTERS 3270.123 & 181 (c); 3280.123 & 181 (C); 3290.123 & 181 (c)

Start Date: _____ Child's Typical Arrival Time _____ Child's Typical Departure Time _____

2023-2024 Payment Schedule

Select program(s) your child will attend
(check all that will apply):

BEFORE CARE ONLY: \$_____/month

AFTER CARE ONLY: \$_____/month

BEFORE AND AFTER CARE: \$_____/month

SUPPLEMENTAL KINDERGARTEN:

\$_____/month

DAILY HOLIDAY CARE: \$_____/day

Annual Administrative Fee: \$50

You are registering for 9 ½ months of care and the plan you choose will be your arrangement for the school year.

Payment Information: A deposit is due at time of registration followed by nine monthly payments due 15 days before the start of the month (September to May). This deposit will be applied to your June 2023 payment. Deposits are non-refundable and non-transferable.

Late Payment Fee: Late payments will be assessed a \$25 late fee if payment is not received by the 20th of each month. Prices listed may be subject to revision.

Late Pick-Up Fee: A late pick-up fee of \$15 for each part of 15 minutes past closing time will be assessed per child.

Services provided as part of care fee (Before Care, After Care and Supplemental Kindergarten): Care • Snack – PM • Transition meetings • Observation/assessment with optional family conference

Services provided as part of care fee (Holiday Care): Care • Snack – PM

Supplemental Kindergarten Program offers an additional half day of learning to children in half-day Kindergarten programs in their school district. Not applicable at all locations.

Holiday Care: Holiday care dates and activities vary by location, please refer to your school district calendar; Y holidays will be listed on our website. Service is made available on first come, first served basis. Registration and payment for daily option is due 15 days prior to use. Not applicable at all locations.

Cancellations: Two weeks' written notice is required for cancellations and withdraws.

Check any assistance
you are receiving:

Third-Party Subsidy

**YMCA Financial
Assistance**

Office Use Only

\$

__ %

I understand that the Y will set up an automatic payment schedule on my account; on card ending in _____.

YMCA Financial Assistance is available to assist families in need. Our program is tied to the Federal Poverty Guidelines. To apply for child care financial assistance, you must first complete and submit an application for subsidized child care in your state. To learn more about our program and to complete an application, please visit philaymca.org.

Persons to whom child may be released:

Name: _____ Relationship to child: _____

Address: _____ Phone: _____

Name: _____ Relationship to child: _____

Address: _____ Phone: _____

Name: _____ Relationship to child: _____

Address: _____ Phone: _____

Parent Signature: _____ Date: _____

Parent Signature (6-month review): _____ Date: _____

OFFICE USE ONLY:

Entered By (signature): _____

Date: ____ / ____ / ____ Unit ID: _____