Safe, fun and convenient!

We offer a safe, enriching environment for youth to spend the hours before and after school, as well as full-day programs when school is out. The Y approaches child care holistically by providing a safe and healthy place to learn foundational skills, develop healthy, trusting relationships and build self-esteem.

- Affordable child care
- Year-round programs
- Specially trained and licensed staff
- Outdoor and indoor physical activity

To find pricing and locations near you, visit ymcalouisvillechildcare.org.

The Y is for everyone. We have an open door policy and parental involvement is encouraged. Flexible rates and financial assistance is available.

Register online by JUNE 1 and PAY NO REGISTRATION FEE with promo code: JOINUS

Located at the Chestnut Street Family YMCA with transportation options
Open from 6:30 a.m. until the start of school and after school until 6 p.m.
Full day programs from 6:30 a.m. to 6 p.m. when school is out, including snow days
Licensed child care that meets or exceeds state licensing requirements

Extensive screening and training for all staff, including CPR and First Aid
Healthy eating habits and physical activity encouraged with nutritious snacks provided daily
Reading activities and homework assistance provided
Enriching centers and activities make learning and discovery fun

FOR MORE INFORMATION, CALL 502.587.7405 OR VISIT YMCALOUISVILLECHILDCARE.ORG
The Y is for everyone and we offer income-based financial assistance. We also accept 3-C and other third-party subsidy reimbursements. Valid contracts must be on file with our office prior to the first day of attendance. Y financial assistance may not be available in combination with other child care subsidies.

**PAYMENT OPTIONS**

Payments can be made by bank or credit card draft. Automatic draft payments must be set up prior to the first day of attendance. Drafts will occur each Friday for the following week, unless they are otherwise scheduled through our main office. Third-party subsidy contracts need to be signed and on file prior to first day of attendance.

**TRANSPORTATION**

Transportation is provided by JCPS between the Chestnut Street Family YMCA and the following schools:

- Atkinson Elementary
- Bloom Elementary
- Brandeis Elementary (magnet program only)
- Breckinridge-Franklin Elementary
- Byck Elementary
- Coleridge-Taylor Elementary
- Dunn Elementary
- Englehard Elementary
- Field Elementary
- Foster Elementary
- Greathouse Elementary
- Highland Middle
- King Elementary
- Lincoln Elementary
- Maupin Elementary
- Portland Elementary
- Roosevelt-Perry Elementary (magnet program only)
- St. Matthews Elementary
- Shelby Elementary
- W.E.B. Dubois Middle
- Wheatley Elementary
- Whitney Young Elementary

The Y is for everyone and we offer income-based financial assistance. We also accept 3-C and other third-party subsidy reimbursements. Valid contracts must be on file with our office prior to the first day of attendance. Y financial assistance may not be available in combination with other child care subsidies.

**REGISTER TODAY**

Register online at [ymcalouisvillechildcare.org](http://ymcalouisvillechildcare.org) by June 1 and pay no registration fee – promo code: JOINUS.

Registration is open all school year and all sites have minimum and maximum enrollment numbers. Please register online at least two business days prior to your child’s start date.

Mailed registration forms should be sent to the address below and post-marked one week prior to start date. Or you may submit registration forms to your Site Director.

**Chestnut Street Family YMCA**
**930 West Chestnut Street**
**Louisville, KY 40203**

If you have additional questions, call 502.587.7405 or visit [ymcalouisvillechildcare.org](http://ymcalouisvillechildcare.org).

**WEEKLY RATES 2020–2021**

**Chestnut Street Family YMCA**

**School-Age Child Care Program**

<table>
<thead>
<tr>
<th></th>
<th>First Child</th>
<th>Each Additional</th>
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<tbody>
<tr>
<td></td>
<td>Program Members</td>
<td>Y Facility Member</td>
</tr>
<tr>
<td>Before School Only</td>
<td>$61</td>
<td>$56</td>
</tr>
<tr>
<td>After School Only</td>
<td>$68</td>
<td>$63</td>
</tr>
<tr>
<td>Before &amp; After School</td>
<td>$82</td>
<td>$77</td>
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</tbody>
</table>

Register by **JUNE 1** and **PAY NO REGISTRATION FEE**

Promo code: JOINUS

**Registration Per Child: From April 15 – June 1: $15**

*From June 2 – June 30: $30 • After July 1: $45*

In-service and snow days are included in total number of days attended for the week. In-service and snow day only rate is $31 per day, per child.

**OUR STAFF KNOW HOW TO SEE AND RESPOND TO CHILD ABUSE.**

FOR MORE INFORMATION, CALL 502.587.7405 OR VISIT [YMCALOUISVILLECHILDCARE.ORG](http://YMCALOUISVILLECHILDCARE.ORG)
**CHESTNUT STREET FAMILY YMCA SCHOOL-AGE CHILD CARE • 2020-2021 SCHOOL YEAR REGISTRATION**

Please only list **ONE CHILD PER FORM** and attach a recent **WALLET SIZE PHOTO AND IMMUNIZATION CERTIFICATE**.

Print legibly, complete all fields and include your registration fee or register online at ymcalouisvillechildcare.org

## CHILD’S INFORMATION

<table>
<thead>
<tr>
<th>First name</th>
<th>Middle initial</th>
<th>Last name</th>
<th>Date of birth</th>
<th>Gender</th>
<th>Age</th>
<th>Race</th>
<th>Physical conditions/special needs</th>
<th>Medications/allergies</th>
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To better serve your child, please indicate if he/she has been diagnosed with any of the following:

- ADD/ADHD
- Convulsions
- Bleeding/Clotting Disorders
- Autism
- Aspergers
- Fragile X
- Cerebral Palsy
- Bipolar Disorder
- Tourettes
- Rhett Syndrome
- Down Syndrome
- Chronic Health Problems
- Asthma/Severe Allergies
- Diabetes
- Heart defect/disease

Does this child have an IEP?  Yes  No

### YMCA Child Care Site

**Name of Child’s School**

Grade in School (2020-2021)

**Participation**

- Before-School Care
- After-School Care
- Before- & After-School Care
- In-Service Day Care
- Snow Day Care

### 1st PARENT/GUARDIAN

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to child</th>
<th>Date of birth</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Primary phone</th>
<th>Cell phone (for emergency communications)</th>
<th>Work phone</th>
<th>Employer</th>
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### 2nd PARENT/GUARDIAN

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to child</th>
<th>Date of birth</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Primary phone</th>
<th>Cell phone</th>
<th>Work phone</th>
<th>Employer</th>
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### METRO UNITED WAY INFORMATION

School lunch classification

- Free
- Reduced
- Full pay

Ethnicity

- Hispanic
- Non-Hispanic

Veteran status (check any that apply)

- Parent is current active military
- Parent is a veteran
- Neither parent is a veteran
- Unknown

### INSURANCE INFORMATION

<table>
<thead>
<tr>
<th>Health insurance company</th>
<th>Policy number</th>
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<tr>
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Name of physician

<table>
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<tr>
<th>Physician phone</th>
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What is your preferred hospital in the event that your child needs to be transported for medical attention

### PLEASE LIST ANY ADULT OTHER THAN THE ABOVE THAT MAY BE PICKING UP THIS CHILD OR THAT MAY BE CONTACTED IN AN EMERGENCY.

Anyone picking up your child must be at least 18 years of age or older. A picture ID is required at pick-up.

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to child</th>
<th>Phone 1</th>
<th>Phone 2</th>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to child</th>
<th>Phone 1</th>
<th>Phone 2</th>
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The YMCA has permission for my children to be photographed and/or interviewed for promotional purposes

- Yes
- No

Yes, I would like to make a charitable donation to the Annual Campaign

- $25
- $50
- $100
- Other/please contact me

Check here if either parent is

- School partnership employee
- YMCA employee
- YMCA family facility member
- Y financial assistance recipient
- 3-C recipient

You must choose one option below to process your registration. Drafts will occur each Wednesday for the current week unless otherwise scheduled through our main office.

- I am currently on draft. Please use the account on file ending in ___ ___ ___ ___.
- Authorized account holder signature ____________________________

- Full payment attached. (Check or money order only)
- I am authorizing a NEW bank draft from my checking account and I have attached a voided check.

- I would like to pay by credit card. Please contact me for billing information.

<table>
<thead>
<tr>
<th>Name</th>
<th>Primary phone</th>
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<tbody>
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</tbody>
</table>

I have the legal authority to sign up the child named on this form and to the best of my knowledge the information on this application form is complete and accurate. I understand that my application will not be processed unless it includes the full fee or automatic draft authorization. I understand that the YMCA prohibits staff members from being alone with children they meet in YMCA programs outside of the YMCA. This includes but is not limited to babysitting, tutoring, sleeping over, etc. In the event I cannot be reached in an emergency, I hereby give permission to the director of the program or designee to secure emergency medical services, including transportation and medical care. I also give permission for the attending physician to order injections, anesthesia or surgery for this child as named above. I understand that medical and accident insurance is the responsibility of the parent or guardian. If my child attends Jefferson County Public Schools, by signing this form I am giving the YMCA permission to communicate and exchange information with JCPS for the purpose of providing and enhancing services to my child. I understand that this release may be revoked by me at any time by written request.

Signature  Date Signed