

Child Care Registration Confirmation for September 2022

Dear Parent and/or Guardian:

Thank you for continuing to use YMCA Child Care Services. We are looking forward to another fun-filled year. To renew your registration for September, we require **this registration form completed and returned to your site supervisor on or before June 24, 2022.**

Child's Name: _____ **DOB:** _____ **Age:** _____
(MM/DD/YYYY)

Home Address: _____

Parent/Guardian Name: _____ **Tel. No.:** _____

Address: _____ **Postal Code:** _____

YMCA Program Choice	Care	Hours
<p>Infants, Toddlers & Preschool Program Choices</p> <p>Chippewa (186 Chippewa St. West) E.W. Norman (599 Lake Heights Rd) Mother St. Bride (414 2nd Ave. West) Our Lady of Sorrows (680 Coursol Rd, Sturgeon Falls) St. Francis (68 Gertrude St. East) St. Theresa (1475 Main St. N., Callander) Woodland (1325 Cedargrove Dr.) Licensed Home Child Care</p> <p>Before & After School Program Choices</p> <p><input type="checkbox"/> Alliance (700 Stones St.) <input type="checkbox"/> Chippewa (186 Chippewa St. West) <input type="checkbox"/> E.T. Carmichael (1351 Chapais St.) <input type="checkbox"/> E.W. Norman (599 Lake Heights Rd) <input type="checkbox"/> M.T. Davidson (330 Lansdowne Ave., Callander) <input type="checkbox"/> Mother St. Bride (414 2nd Ave. West) <input type="checkbox"/> Our Lady of Fatima (60 Marshall Ave.) <input type="checkbox"/> Our Lady of Sorrows (680 Coursol Rd, Sturgeon Falls) <input type="checkbox"/> South Shore (60 Beattie St., Nipissing) <input type="checkbox"/> St. Francis (68 Gertrude St. East) <input type="checkbox"/> St. Theresa (1475 Main St. N., Callander) <input type="checkbox"/> Vincent Massey (15 Janey Ave.)</p>	<p><input type="checkbox"/> Full-Time: Monday to Friday</p> <p><input type="checkbox"/> Part-Time: (2 or 3 set days) <small>(Circle days requested)</small></p> <p style="text-align: center;">M Tu W Th F</p>	<p><input type="checkbox"/> Full Days (7am to 9am) <input type="checkbox"/> Before School (7am to 9am) <input type="checkbox"/> After School (3pm to 6pm) <input type="checkbox"/> PD Days (7am to 6pm) <input type="checkbox"/> December Break (7am to 6pm) <input type="checkbox"/> March Break (7am to 6pm)</p> <p><u>Hours of Care Required:</u> _____ to _____</p> <p><u>Chippewa and Woodland locations only:</u></p> <p><input type="checkbox"/> Extended AM (6am to 7am) <input type="checkbox"/> Extended PM (6pm to 3am) <input type="checkbox"/> Overnight Care (6pm to 7am)</p>

<input type="checkbox"/> Woodland (1325 Cedargrove Dr.) <input type="checkbox"/> Licensed Home Child Care PD Day and Break Program Choices <input type="checkbox"/> Chippewa (186 Chippewa St. West) <input type="checkbox"/> Mother St. Bride (414 2nd Ave. West) <input type="checkbox"/> Our Lady of Sorrows (680 Coursol Rd, Sturgeon Falls) <input type="checkbox"/> St. Francis (68 Gertrude St. East) <input type="checkbox"/> St. Theresa (1475 Main St. N., Callander) <input type="checkbox"/> Woodland (1325 Cedargrove Dr.) <input type="checkbox"/> Licensed Home Child Care	
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**Please note that children attending the school where our school-age program is located have priority for child care.*

- I, _____ (please print), understand that it is my responsibility to set-up and ensure my child's school transportation, if applicable, as some restrictions may apply due to school zoning.
- I understand that the above request for care, if different than my currently registered care, requires approval of the YMCA Child Care Supervisor.
- I further understand that I will receive a confirmation (with a payment schedule letter from the finance department once my registration is complete).
- I understand that there is a \$10 annual child care registration fee (per child). My child(ren)'s next annual fee will be September 2022 and so on as long as the child remains in a YMCA Child Care Program.

Please send my confirmation to this email address: _____

Parent/Guardian Signature: _____ **Date:** _____

Date Received:	Received by (Staff Initials):	Notes:
Program/Care Approved: <input type="checkbox"/> Full Days <input type="checkbox"/> Before School <input type="checkbox"/> After School <input type="checkbox"/> PD Days and Breaks Mon. Tues. Wed. Thur. Fri.	Room Name: E.g., Infant 1	Supervisor/Lead Approval:
Registration Done by:	Date:	Notes: