



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# TIME TO EXPLORE

## Kids Day Out

2018 - 2019 SCHOOL YEAR

4K (4-YEARS-OLD) - 6TH GRADE (13-YEARS-OLD) 6:00AM - 6:00PM

On days when school is not in session our full day Kids Day Out program invites children to try new experiences, giving children opportunities to explore new activities and build relationships. We provide a trusting environment where you and your child will feel welcomed. Snacks are provided. Participants should bring a swimsuit, towel and a bag lunch daily, unless otherwise noted. Minimum enrollment of 8 children per program date to provide care. Some days field trips will be offered at no additional cost. Children will be divided into groups by grade levels.



### KIDS DAY OUT SAMPLE SCHEDULE

6:00am - 9:00am	Arrival, Morning Snack & Free Play
9:00am - 10:30am	Large Group Activity
10:30am - 12:00pm	Open Gym Time
12:00pm - 12:30pm	Lunch
12:30pm - 1:30pm	Rest, Reading and Relaxation
1:30pm - 3:30pm	Open Swim (when available)
3:30pm - 5:00pm	Crafts
5:00pm - 6:00pm	Free Time and Pick Up

### FEES & HOW TO REGISTER

\$32/day

Payment will be drafted the week of program. Drop off this completed form at the Y Welcome Desk no later than 10 days prior to date enrolled or a \$10 late fee will be applied if space is available. We need to have at least 8 children enrolled by the deadline to run the program. If the program is running, no refunds will be issued if your child is registered and does not attend. **Photo ID is required in order to pick up your child from Kids Day Out.**

### KIDS DAY OUT SELECTIONS

The registration deadline is 10 days prior to date.

Please check dates attending:

- |                                      |                                      |                                   |
|--------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> November 2  | <input type="checkbox"/> December 28 | <input type="checkbox"/> March 26 |
| <input type="checkbox"/> November 21 | <input type="checkbox"/> December 31 | <input type="checkbox"/> March 27 |
| <input type="checkbox"/> November 23 | <input type="checkbox"/> January 18  | <input type="checkbox"/> March 28 |
| <input type="checkbox"/> December 26 | <input type="checkbox"/> February 15 | <input type="checkbox"/> March 29 |
| <input type="checkbox"/> December 27 | <input type="checkbox"/> March 25    | <input type="checkbox"/> April 19 |

Parent Names: \_\_\_\_\_

Parent Phone (while child is in program): \_\_\_\_\_

Child's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Parent's Email (Required): \_\_\_\_\_

Please choose one of the three options below:

My child is in the School Age Program. (No Health History or Emergency Care Plan needed)

Site Enrolled: \_\_\_\_\_

My child has attended a Kids Day Out during this academic school year and I have already completed the Health History form. (No Health History or Emergency Care Plan needed)

My child is new this academic school year (Sept. 2018 - June 2019). Parent must complete the Banking Authorization form (located on the back of this page) and the Health History and Emergency Care Plan (which will be emailed to the address above).

### For more information contact:

Joel Guidinger, School Age Director-Northern Ozaukee/  
Port Washington-Saukville  
262-235-9640 or jguidinger@kymymca.org

STAFF USE ONLY  Payment Received  Completed Forms  
Date & Time of Form Submission: \_\_\_\_\_

KETTLE MORaine YMCA at Northern Ozaukee

401 Highland Drive, Fredonia, WI 53021 | 262-235-9640 | www.kymymca.org

Updated 09/26/18



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# KETTLE MORaine YMCA

## Feith Family Ozaukee Branch - Automatic Payment

Please return completed form to your YMCA Welcome Desk to the attention of the billing department or via email to [colson@kmymca.org](mailto:colson@kmymca.org).

**Please check 1 of the 3 options below:**  
(Banking information required for all Wisconsin Shares families.)

**Voided check attached**

**Checking** or **Savings Account Number** \_\_\_\_\_

**Bank Name** \_\_\_\_\_

**Routing Number** \_\_\_\_\_

**Credit or Debit Card Number** \_\_\_\_\_

**Name** (as it appears on card) \_\_\_\_\_

**Exp Date** \_\_\_\_\_ **3 Digit Security Code** \_\_\_\_\_

**I receive one or more of the following:**

**Employee Discount** YMCA Dept \_\_\_\_\_

**Multiple Children Discount**

Children's Names \_\_\_\_\_

Parent Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

I hereby authorize the Kettle Moraine YMCA to automatically charge my account for child care tuition and program fees in which my child is enrolled. By signing this agreement, or electronically submitting, I agree that each charge shall be the same as if it were a check or charge drawn to the Kettle Moraine YMCA and signed personally by me. I understand that I am financially responsible for all payments. Should any charge be rejected by my financial institution for any reason, I agree to be responsible for that payment plus \$25 for bank account NSF or for credit/debit card declines. I am aware that if my account carries a balance due for current child care charges, my child's care may be suspended or terminated. The authority to continue drafts is to remain in effect until revoked by me in writing. Banking changes or child care revocation requires 2 weeks written notice in advance of the draft date.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(I agree that my electronic signature is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding. I agree to apply this signature to all fields where I agreed to use my electronic signature on this form.)

Child(ren) Name(s) \_\_\_\_\_

*Additional Info:*