MUST complete form for EACH CHILD and submit in-person at any Greater Wichita YMCA branch location.

MUST complete form f	for EACH CHILD and submit <u>in-person</u> at any Greater Wi	chita YMCA branch location.		
CHILD'S FULL NAME		CHILD DATE OF BIRTH / /		
PARENT/GUARDIAN	FULL NAME	ID#		
CONTACT PHONE NU	IMBER (for registration only)	EMAIL (for registration only)		
Complete registration branch location.	n and all initial fees REQUIRED ONE FULL WEEK in adv	vance, on Monday. Registration service available at ANY YMCA		
	Mark here for School Day Out ONLY	ADDITIONAL REGISTRATION FORM REQUIRED		
Select One	KEY ACADEMY: WEEKLY PRO	OGRAM FEES AND SESSION CHOICES		
	BEFORE SCHOOL ONLY	\$65 Member Rate / \$70 Community Rate		
	AFTERSCHOOL ONLY	\$70 Member Rate / \$75 Community Rate		
	BEFORE AND AFTERSCHOOL	\$80 Member Rate / \$85 Community Rate		
Mark Site	LOCATION	SITE ADDRESS		
	Andover Cottonwood	1747 N. Andover Rd., Andover, KS 67002		
	Andover Martin	2342 N. 159th St. E., Wichita, KS 67228		
	Andover Meadowlark	1122 N. 159th St. E., Wichita, KS 67230		
	Andover Prairie Creek	654 S. YMCA Dr., Wichita, KS 67002		
	Andover Sunflower	616 E. Douglas Ave., Andover, KS 67002		
	Andover Wheatland	15200 E. 21st St., Wichita, KS 67230		
	El Dorado Skelly (AFTERSCHOOL ONLY)  Also Serving: Blackmore and Grandview	951 Skelly St., El Dorado, KS 67042		
	Wichita Beech (USD259)	1830 S. Cypress St., Wichita, KS 67207		
	Wichita Benton (USD259) Pending KDHE License	338 S. Woodchuck Lane, Wichita, KS 67209		
	Goddard Amelia Earhart Also Serving: Goddard CDC and Oak St.	19201 W. 23rd St. S., Goddard, KS 67052		
	Goddard Apollo	16155 W. Apollo St., Goddard, KS 67052		
	Goddard Explorer	16746 W. Explorer St., Goddard, KS 67052		
	Renwick St. Marks (AFTERSCHOOL ONLY)	19001 W. 29th St. N., Colwich, KS 67030		
	Valley Center Abilene Also Serving: VC West	522 N. Abilene, Valley CEnter, KS 67147		
	Valley Center Wheatland	800 Meadow Rd., Valley Center, KS 67147		
Is your Child on a YM If yes, what parent of PROGRAM SCHEDULI Anticipated Drop Off Anticipated Pick Up T PLEASE NOTE: Childre the school and/or cla	Time for AM Session:	/A Not enrolled in AM KEY ACADEMY START DATE/// /A Not enrolled in PM  ve unaccompanied to PM Session. Please make sure to communicate with staff do NOT escort children to or from the latchkey program. Preschool an		
DATE RECEIVED/	, STAFF REMINDER SET AUTO/BANK FEES. AS APPROPRIATE.			
TIME RECEIVED:	AM / PM SPECIAL INSTRUCTIONS	STAFF SIGNATURE DATE		



# 2025–26 ACADEMIC YEAR ENROLLMENT FORM GREATER WICHITA YMCA SCHOOL-AGED CHILD CARE PROGRAMS

## KEY Academy and School Day Out

PAYMENT DUE AT ENROLLMENT/REGISTRATION	2025-2026 KEY/SDO
\$15/CHILD/SESSION ANNUAL ENROLLMENT FEE (non-refundable, non-transferable):	\$15 or \$30
FIRST WEEK'S KEY ACADEMY FEES (if enrolling within ten business days of intended participation):	\$
SCHOOL DAY OUT PAYMENT (non-refundable):	\$
TOTAL FEES/PAYMENT DUE AT REGISTRATION PAYABLE BY  ☐ Cash ☐ Credit/Debit Card ☐ Check/Money Order:	\$

### **TERMS OF AGREEMENT**

Your signature confirms agreement with the following:

- I/we understand that session Enrollment Fee, due at registration, is non-refundable and nontransferable
- I/we understand that weekly Fees are due regardless of attendance and must be paid in advance, at least one full week, on Monday's by 10 PM
- I/we understand that those wishing to cancel their weekly Key Academy program before the end
  of the current school year, can do so by contacting our Child Care Accounts team at childcare@
  ymcwichita.org at least two (2) weeks prior to the week of cancellation.
- I/we understand payments will NOT be accepted at my school location for SDO, Break Club OR weekly KEY Academy Fees
- I/we understand that fees are not prorated for regular school day's out, select holidays or school cancellations
- I/we release the Greater Wichita YMCA, its staff, and participating school districts from all
  claims of injury which may be sustained by enrolled child while participating in any YMCA
  sponsored activity, whether caused by the negligence of the YMCA or otherwise
- I/we understand that the YMCA reserves the right to dismiss any participant if they or their parent/guardian fails to comply with YMCA policies or procedures
- I/we have read and agree to abide by all program expectations as outlined in the Parent Information and Policy Document
- I/we the undersigned attest to being the legal parent/guardian of said minor and give
  permission for them to participate in all program activities supervised by YMCA staff and that
  they are physically and mentally capable to participate and follow program expectations.

	/ /
SIGNATURE (Parent, Legal Guardian, Legal Custodian)	DATE

Fees can be paid weekly, biweekly, or monthly. Payments can be made on-line, via automatic payments (bank or card), or at any YMCA facility Branch.

DCF payment are made through the EBT system, a contracted provider of DCF. Once you have transferred a payment you must verify the transaction by completing a DCF Funds Transfer Record Form that can be found on our YMCA website at ymcawichita.org/childcare. Your account will not reflect a payment until the transfer form is complete.

Child Care site staff do NOT have access to your account. All account questions should be directed to childcare@ymcawichita.org.

See Parent Information and Policies for full program fee policies, payment deadlines, cancellation process and prorated weeks.

View Parent Information and Policies online at ymcawichita.org/KEY.

# AUTOMATIC PAYMENT CARD (CREDIT/DEBIT) INFORMATION I hereby authorize the Greater Wichita YMCA to intiate a) recurring debit entries from my bank account with the Financial Institution provided or b) recurring charges to my credit card as provided to pay my YMCA weekly Key Academy program fees. Member OR Authorized Account Signature Date Name On Card Last 4 of Card Parent/Guardian Signature (if under 18)

### PROGRAM FEE AUTOMATIC PAYMENT PLAN

The KEY Academy weekly program fee amount indicated above will be automatically deducted from/charged to my (check one):

□ BANK ACCOUNT (Checking, Savings)
□ CARD (Credit, Debit)

This Automatic payment plan is a continuous program, however is not designed to exceed the program's end date of

### STATEMENTS OF UNDERSTANDING

### I UNDERSTAND THAT:

- If enrolling LESS than 2 weeks in advance, the first week cannot be paid by automatic payment.
- If I wish to exit the KEY Academy program and/or discontinue the agreed weekly payment amount before the program's end date (above), I must notify the Greater Wichita YMCA IN WRITING (childcare@ymcawichita.org) TWO (2) WEEKS PRIOR TO THE WEEK OF CANCELLATION.
- Should any transfer/payment not be honored by my provided financial institution/card issuer for any reason I am responsible for that payment PLUS any/all applicable service fees assessed.
- KEY Academy program rates are subject to change and I will be notified, in writing, prior to fee adjustments.
- It is my responsibility to notify the Greater Wichita YMCA of any changes to my aboveprovided payment method prior to the next weekly automatic payment of fees.
- It is my responsibility to notify the Greater
  Wichita YMCA of any changes to my address,
  phone number, email address, or other provided
  contact information.
- Enrolled children will be denied KEY Academy/Fun Club access and services until any/all balance(s) due are paid.
- My Credit card information may be updated with "Account Updater Services" offered by Card Networks.
- The voided check provided with this enrollment form is for information purposes only.

### PARENT/GUARDIAN/CUSTODIAN INITIALS:

 Accept my adjacent signature as authorization to begin weekly automatic payment of indicated fees.

BANK INFORMATION
Name(s) on Acct
Routing #
Last 4 of Account #