

2020 FULL DAY CHILD CARE REGISTRATION

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

INITIAL

CHILD'S INFORMATION		TUITION RATES 7:00AM-6:30PM		
Child's Name:	Se	x	*FEES EFFECTIVE 1/1/20	
Date of Birth:/_	/Program Start Date:		THES EFFECTIVE 1/1/20	20-12/31/2020
Street Address:			INFAN	IT
	Zip Code:		□5 days per week	\$1425/mo
City	21p code		4 days per week	\$1280/mo
			□3 days per week	\$1105/mo
PARENT/GUARDIA	N'S INFORMATION		□2 days per week	\$810/mo
			TODDLER	
Parent/Guardian #1 Name	: Se	x	□5 days per week	\$1350/mo
(C): ()	Company :		☐4 days per week	\$1190/mo
(W): (Job Title:		□3 days per week	\$1025/mo
			□2 days per week	\$700/mo
Parent/Guardian #2 Name: Sex			PRESCHOOL	
			□5 days per week	\$1175/mo
(C): ()	Company :		□4 days per week	\$1005/mo
(W): ()	Job Title:		☐3 days per week	\$860/mo
			2 days per week	\$630/mo
In addition to the parent(s)/guardian(s) who have signed below, the following people listed below are authorized to pick up the child or to be contacted in case of an emergency if neither parent is available to assume responsibility for the child. (2 NAMES REQUIRED BY NJ STATE LAW)			□5 days per week □4 days per week □3 days per week □2 days per week	\$1115/mo \$955/mo \$810/mo \$595/mo
·			<u>If Part-Time,</u> Please Check Appropriate Day(s):	
Cell: (Relationship to Child			Thursday
			☐ Monday ☐ Tuesday	☐ Friday
Name:			☐ Wednesday	□ I I I day
	Relationship to Child			
	FEES			
Payments made aftA 10% sibling disco	check to YMCA by the 15 th of the month prior (i.e. er the 15 th of the month prior may be subject to a unt will be applied to children simultaneously enro of fee allowances are made for occasional absence	\$20.00 late fee. olled in FULL TIME SA	CC, KED, or Child Care at the	e Learning Center.
Parent Signature			Date	
PARENTS ARE REQUI	RED TO KEEP THIS INFORMATION CURRENT	BY CONTACTING T	HE LEARNING CENTER WI	TH CHANGES.
	EZ PAY (OPTION		

Please charge my credit card on file automatically when payments are due. _