

PREPARE FOR TOMORROW Teen Club Registration Packet

YMCA OF ORANGE COUNTY | ymcaoc.org



YMCA OF ORANGE COUNTY - MIDDLE SCHOOL REGISTRATION						
CHILD INFORMATION						
Today's Date	Child's School	Grade: Current / Fall	Start Date	Child's Cell Phone		
Child's Last Name	Child's First Name	Date of Birth	Sex M F	ID Verified		
Home Address		City	Zip Code	Home Phone		
		MEDICAL INFORMATIO	ON			
Does your child take pre	escribed medications?		Yes	No		
If yes, what kind?						
Does your child have an	ny allergies?		Yes	No		
Please list any allergies						
Does your child have an	ny special needs?		Yes	No		
If yes, what kind? CHILD'S HEALTH STATEME	NT: As the parent/guardian	of the above named child. L. t	he undersigned, assert that th	e information above is true		
and correct and understand my child is in excellent phys regarding my child's health, my child's activities.	that at a YMCA Child Care Pr ical health and needs no rest I understand that is my oblig	rogram, physical activity is a r trictions (except what is listed gation to seek professional me	egular part of the program. To above) from strenuous activit dical advice and to inform the	o the best of my knowledge, y. If I have any questions YMCA of any restrictions on		
emergency dental or medica This care may be given unde	al care prescribed by a duly li	censed physician (M.D.) denti	an, I hereby give Consent to t st (D.D.S.) or osteopath (D.O. or well being of the child abov) for the above name child.		
Parent/Guardian Signature:			Date:			
CHILD SCHEDULE INFORMATION						
Days Per Week	МТ	W TH F	(check all that apply)	Before After		
Other / Drop In	Thanksgiving	Winter Break	Spring Break	Summer		
PARENT INFORMATION						
RESPONSIBLE PARTY INFORMATION (The " Responsible Party " is the parent/legal guardian enrolling the child and primarily responsible for payment of fees, signing releases, authorizing individuals to sign in/out the child (on custodial days of attendance) and making any changes to the child's participation in the program.						
Responsible Party's Last Name	Responsible Party's First Name	Date of Birth	Relationship to Child	Cell Phone		
Home Address	L Check if same as child	City	Zip Code	Home Phone		
Email Address	Occupation	Company	City	Work Phone		
Other Parent/Guardian Last Name	Other Parent/Guardian First Name	Date of Birth	Relationship to Child	Cell Phone		
Home Address	L Check if same as child	City	Zip Code	Home Phone		
Email Address	Occupation	Company	City	Work Phone		
Child Lives with: Mother Father Both 50/50 Other:						
MULTIPLE PAYING PARTIES SPLIT PAYMENTS - All charges to take place on the 1st business day of the month						
\$ or %	First Payer	Amount/Percentage	Second Payer	Amount/Percentage		

EMERGENCY CONTACTS

	The following individuals hav			
	ram and can be contacted in dividual not listed will be pick			fy your Child Care Director in
Name	Relationship to Child	Home Number	Cell Number	Email Address
	following individuals are re d copy of the official court do			lue to a court-issued
Name:		······································	Date of court order:	
Name:			Date of court order:	
	YMCA of ORANG	E COUNTY - ADMIS	SION AGREEMENT	
 B. That field trips, eith No additional permissio C. That YMCA staff and program. D. That should a perso safety of the child, staff E. That the YMCA is may for investigation. F. My child's file is avai without prior parental/g may interview your child G. That program partice fees will result in my child costs to myself. I furth credit card for any reases H. The YMCA and the separent/guardian. If YM provide a safe environne I. I understand that I and J. That the YMCA may * Emergency names and 	n slips will be required. I volunteers are not allowe marrive to pick up my chi may have no recourse be andated by state law to re- lable for review by Depart guardian permission. Law d if necessary. sipation requires a YMCA s ild not being allowed to p er understand there is an on. staff employed by the YMC CA document are request hent for children.	vehicles or charter buse ed to babysit or transpo- ild who appears to be un- ut to contact the police. eport any suspected child tment of Social Services w enforcement personne school-age membership articipate in the program administrative processi CA will not become invol ed, the court must requi- ys written notice when the illment for any of the fol correct.	s, are part of the Middle s rt my children at any time nder the influence of drug d abuse or neglect to the s and law enforcement ma el may also request inforr to be in good standing ar m and could result in lega ng fee for any payment re ved in any custodial dispu- est them in writing. The terminating from the YMC lowing reasons:	School program activities. e outside of the YMCA s or alcohol, for the appropriate authorities ay interview my child mation in your file and hd that non-payment of I referral with additional eturned by my bank or utes between
 * Non/Late/NSF paym * Failure to notify YMC * Behavior that is des * Behavior that is cor * Any single incident t * Harassment, violent by parent/guardian 		it. or refusal to replace said gerous to others and/or ter director to be dange h behaviors against a st	d property. self. rous, harmful or disruptiv	
Parent/Guardian Signature:			Date:	



YMCA PHOTO/AUDIO VISUAL/NARRATIVE RELEASE

I am 18 years of age or older and, if not, my parent or legal guardian has also provided their consent by signing below.

Consent & License. For my participation in activities to be conducted by the YMCA of Orange County or any of its chartered member associations in the United States (collectively "the Y"), and collaborating third parties, I consent, now and for all time, to the making, reproduction, editing, broadcasting or rebroadcasting of:

- video film or footage of me,
- sound track recordings of me
- photo reproductions of me
- any narrative account of my experience

My consent includes a perpetual license to the Y and collaborating third-parties for the use of the above materials for publication, display, sale or exhibition in promotions, advertising, education and commercial uses. Use includes reproductions in any form and media currently existing or later conceived, adaptations and/or revisions, throughout the world in perpetuity.

I understand and agree there may be no additional compensation for this license, and I will not make any claim for payment of any kind from the Y or collaborating third-parties. I may, or may not be, identified in such licensed uses; however, my name will not be used to endorse any particular products or services.

Ownership, Confidentiality, and Shared Use. With respect to any of the above uses, I further agree:

- All works shall belong to YMCA of Orange County;
- The Y has no duty of confidentiality regarding any licensed uses;
- YMCA of Orange County shall exclusively own all known or later existing rights to the uses throughout the world;
- The Y and collaborating third-parties may use any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account for any purpose without additional compensation to me.

Release from Liability. By signing below I agree that my consent is irrevocable. I hereby release and discharge The Y and collaborating third-parties, from any and all claims, actions, lawsuits or demands of any kind arising out of my consent, license grants, uses, or the shared uses of any works or materials referenced herein.

		I do consent for my	self and spouse (if applicable)	I do not consent
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L	I hereby consent	and grant the license	s detailed in the	e foregoing on	behalf of my	minor child(ren). I
а	am the parent or lega	al guardian of			L	I do not consent.

Signature of Member/Parent or Legal Guardian

Date

Printed Name

Spouse/Child(ren)'s Names (if applicable)

YMCA OF ORANGE COUNTY ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT

Adult Member/Participant Name

(Please Print)

Child Member/Participant Name (if applicable)

(Please Print)

IN CONSIDERATION for being permitted to utilize the facilities, services, and programs of the YMCA of Orange County (the "YMCA") (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, on behalf of himself or herself and such participating children and any personal representatives, heirs, and next of kin (hereinafter referred to as "the undersigned") hereby acknowledges, agrees and represents that he or she has inspected, or immediately upon entering or participating will inspect, and carefully consider such premises and facilities and/or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO, OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY ON-SITE OR OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

THE UNDERSIGNED, ON HIS OR HER BEHALF AND ON BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, volunteers and agents (hereinafter referred to as "Releasees") from all liability to the undersigned or such children and all personal representatives, assigns, heirs, and next of kin of the undersigned for any loss or damage, and any claim or demands on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence, active or passive, of the Releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA. The undersigned expressly and knowingly waives all rights under California Civil Code Section 1542, which provides: "A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor."

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees, and each of them, from any loss, liability, damages or costs they may incur, whether caused by the negligence, active or passive, of the Releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA. The undersigned understands and agrees that the YMCA is not required to provide insurance to cover the undersigned or such children in the event they suffer injury, death, property loss, theft or damage of any sort upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.

The undersigned agrees and acknowledges that use of the YMCA facilities and services, and participation in the YMCA programs, may involve inherent danger and risk, including, without limitation, the risk of physical injury, death or property damage. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR, AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence, active or passive, of Releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA. The undersigned acknowledges that any injuries that the undersigned or such children sustain may be compounded by negligent first aid or emergency response of the Releasees and waive any claim in respect thereof.

THE UNDERSIGNED further expressly agrees that the foregoing ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY AGREEING TO THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM THE YMCA IN CASE OF INJURY, DEATH OR PROPERTY LOSS OR DAMAGE. I UNDERSTAND THAT THIS DOCUMENT IS A PROMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS. IF SIGNING ON BEHALF OF MINOR: I ALSO UNDERSTAND THAT THIS AGREEMENT IS MADE ON BEHALF OF MY MINOR CHILD(REN) AND/OR LEGAL WARDS AND I REPRESENT AND WARRANT TO THE YMCA THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF SUCH MINOR(S).

I have read and understand the terms of this Assumption of Risk, Release and Waiver of Liability, and Indemnity Agreement and agree to its terms.

Signature

Date

Emergency Contact Name

Emergency Contact Number



Dear YMCA Teen Club Families,

We would like to take this time to explain our cell phone & electronics policy. Focusing on responsibility and development of our teen students, we allow the use of student's personal cell phones and electronics. The students have standards that need to be followed with the use these electronics. Please review with your student the below standards that are implemented at the YMCA Teen Club. A parent & student signature is required.

Cell Phone and Electronic Permission

- 1. The YMCA Teen Club is not responsible for any lost, broken, or stolen items.
- 2. The YMCA Teen Club is not able to monitor messages or internet use on personal devices.
- 3. My student will not use their cell phone or electronics for bullying (i.e. inappropriate text messages to other students, etc.)
- 4. Each cell phone is for the student's personal use and may not be shared with other students.
- 5. During planned activity times, students are expected to put electronics away to participate in activities
- 6. Personal laptops are prohibited.
- 7. Parents will contact the site phone to provide permission to have student released daily.

I have read and agree to the above statements and I give my student permission to use their electronics at the YMCA Teen Club.

I understand that if negative behavior occurs, my student's electronics may be confiscated for the day and my student may be asked to keep their electronics at home.

Date:

Parent Name:

Student Signature:

Parent Signature:

Student Name:

Billing Information / Electronic Funds Transfer (EFT) Authorization

RESPONSIBLE PARTY INFORMATION (The "Responsible Party" is the parent/legal guardian enrolling the child and primarily responsible for payment of fees, signing releases, authorizing individuals to sign in/out the child (on custodial days of attendance) and making any changes to the child's participation in the program.

Account Holders First/Last	Child(ren)'s Name(s) First/Last	Daytime Phone Number	Email Address
Child Care Location	Account Holder Signature		Date

I hereby authorize the YMCA of Orange County to initiate debits from the Bank/Card account indicated below on the first business day of each month for the monthly child care tuition. I understand and agree to pay a non-refundable andannual registration fee upon enrollment/re-enrollment and applicable tuition is due upon enrollment. Tuition fees will not be refunded without 30-days written notice and I further understand and agree to pay the \$25 service charge fee for any and each payment that does not clear my account. Furthermore, I agree to pay a \$25 late payment fee for tuition payments not paid in full by the first of the month and understand late payments may result in suspension or termination of child care services.

MULTIPLE PAYING PARTIES SPLITTING PAYMENTS - All charges to take place on the 1st business day of the month First Payer Amount/Percentage Second Payer Percentage % \$ or Child(ren)'s Name(s) Account Holders First/Las First/Last Daytime Phone Number Email Address Child Care Location Account Holder Signature Date This section needs to be cut and shredded after information has been entered Bank Account: Credit Card Information Checking Savings Credit Card Number: Bank Account Number: Expiration Date: Routing Number: