



YWCA of Queens Center for Children Application Form

New Student _____ Returning Student _____

Student Name : _____

Date of Birth : _____ Sex: M ____ F ____

Address : _____
_____ (Zip code) _____

Tel #: Home: _____ Emergency : _____

E-mail: _____

School: _____ Grade : _____

Who will be picking up your child (ONLY listed names will be allowed to pick up child)
:

Health Conditions (i.e. Asthma, Allergy, Diabetes, etc.):

List any talents or special interests:

Comments/or special instructions:

1. I will follow the policies and regulations of the YWCA of Queens.
2. I will follow the refund policy of the YWCA of Queens.
3. I understand that there is limited liability at the YWCA of Queens while my child is enrolled in the school.

Parent Signature: _____ Date : _____

YWCA of Queens Program Enrollment

I would like to enroll my child in these programs: (Please check all that apply)

- Afterschool Program (Ongoing)
- Children’s Chorus
- illumiNATION Drama Program
- MidWinter Recess Camp
- Spring Recess Child Care
- Summer Day Camp (Early Bird Registration begins April)

For Office Use Only

Tuition: _____	Membership: _____	Total Paid: _____
Balance: _____	Date: _____	Staff: _____
Medical Record ()	Photo Release Form ()	Permission Slip ()
Refund Policy ()	Day Care Home Enrollment ()	Pick-Up/Drop-Off ()

YWCA of Queens Permission Slip

Please read the following and sign at the bottom.

1. I permit my child to leave the YWCA of Queens premise for YWCA of Queens program related trips such as field trips.
2. I give the following person the permission to pick up my child from YWCA of Queens. In the event that this person cannot pick up my child, I will call the YWCA of Queens to authorize another person. At no time will an unauthorized person be permitted to pick up my child from YWCA of Queens.

Child's Name

Name of person to pick up/drop off the child

Parent Signature

Date

YWCA of Queens
PHOTO/MEDIA RELEASE FORM

- I hereby grant permission to the YWCA of Queens to take and publish photographs or video clips of myself and my child for any legitimate purpose including the use in the media or in YWCA of Queens promotional materials. I release all rights to such photographs & video clips and I acknowledge that the YWCA of Queens will be the sole owner of all rights arising out of their use for all purposes. I understand that I shall receive no compensation for their use.
- I **DO NOT** grant permission to the YWCA of Queens to take and publish photographs or video clips of myself and my child for any legitimate purpose including the use in the media or in the YWCA of Queens promotional materials. I **DO NOT** release all rights to such photographs or video clips and I **DO NOT** acknowledge that the YWCA of Queens will be the sole owner of all rights arising out of their use for all purposes. I understand that I shall receive no compensation for their use.

Child's Name

Signature of Parent or Guardian

Date

YWCA of Queens

Refund Policy

1. The registration deadline is one week prior to start date given that there are available seats.
2. YWCA Membership fee is not refundable or transferable.
3. In case of camp cancellation made by YWCA of Queens, parents will be notified at latest three days prior to start date.
4. There is a 40% penalty fee of the tuition for cancellation.
5. Request for refund must be made in person with receipts.
6. Please allow 4-6 weeks for refunds.
7. Full credit or refund will be given to cancellation made one week prior to the first day of school.
8. 75% of the fee is refundable to cancellation made one day before the school.
9. 50% of the fee is refundable to cancellation made within the first week of the school.
10. No refund will be given to cancellation made after the first week of the school.
11. No refund will be given due to weather-related cancellation days.
12. If you have any questions, please call the program staff at 718-353-4553.

Parent Signature (부모서명)

Date (서명일)

YWCA of Queens
Pick-up/Drop-off Permission Letter
(For Bus Services only)

I, _____ give permission to the YWCA of Queens to pick up/drop off
Name of Parent or Guardian

Name of Student

Contact Phone #: Home _____, Work: _____

Mobile _____,

Emergency Contact #: _____

Bus Pick-Up Service: **One-Way:** A.M. _____, P.M. _____ **Two Way:** _____

Home/Designated Address: _____

Comments/Special Instructions: _____

The YWCA of Queens will schedule a pick-up/drop-off time for your child and notify you.

Signature of Parent or Guardian

Date

For Office Use Only

One Way: AM____, PM____

Two Way: _____

Pick-Up Time: _____

Drop-Off Time: _____

YWCA of Queens Reminder for Parents

- YWCA of Queens is licensed by the NYC Department of Health and registered with the NY State Office of Children & Family Services. We have qualified teaching staff and a clean and safe facility to provide quality service for your children.
- When picking up your child, please do not park or stop your car in the building driveway.
- Please park in front of the building to pick-up children.
- Please remind your children to write down homework either on a notebook or memo pad.
- Please remind your children to bring books, notebooks and supplies needed to do homework.
- Please double check homework at home. If homework was not completed or incorrectly done, let us know immediately.
- Please remind your children to bring supplies needed to do work.
- Please call in case of absence (children riding YWCA bus must call in the morning of that day).
- YWCA of Queens operates by the public school calendar. On Half-days, our after school program will be open from 1:00PM-6:00PM (YWCA bus will start pick-up at 12pm from designated locations), and closed on holidays. Winter Camp and Spring Camp are available during the holidays.
- Please fill out the lunch form. The form is needed for the snack that we get from the city.
- The teachers are available to talk with you. Please let us know about any concerns.
- If you have any questions, please call the Director or Coordinator 718-353-4553.