



**FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

April 2016

Thank you for choosing the Brandywine YMCA for your before and after school care. Please take a few moments to read and fill out the enclosed paper work to register your child for our program.

### **HOW TO REGISTER**

1. Complete the attached Youth Program Information form. This registration will guarantee you a spot from year to year until your child completes 5<sup>th</sup> grade or you notify us in writing to cancel your child out of the program. If you need to add/change or cancel your child's care in the program, you need to email the child care registrar at [rkapa@ymcade.org](mailto:rkapa@ymcade.org). All changes must be submitted in writing.
2. Complete the Bank Draft Form. All families will be set up on bank draft using your checking, savings, debit or credit card accounts. Tuition can be deducted on the 1<sup>st</sup> or the 15<sup>th</sup> of each month, or you may choose to split the payment. Deductions begin in September and end in May. Statement billing is not available.
3. Anyone wishing to apply for financial assistance will need to apply first to Purchase of Care through the State of Delaware. Information on applying can be found at <https://assist.dhss.delaware.gov/>. If denied by POC, please bring in denial letter and then apply for YMCA Open Doors financial assistance.
4. Registrations cannot be accepted without a completed physical form including immunization records signed by your doctor. A copy of your child's school physical is acceptable. Physicals will be kept on file for all children through their completion of 5<sup>th</sup> grade. You will not need to resubmit new information each time you register.

### **Rates for the 2016-17 school year:**

1 day week	\$114/month
2 days week	\$183/month
3 days week	\$267/month
4 days week	\$322/month
5 days week	\$359/month
AM care	\$125/month

**Kids Club**– Kindergarten through 5<sup>th</sup> grade.

Held at the Brandywine Y 7 a.m.–6 p.m. on professional and single day school holidays and weather school cancellations. An additional fee is required. The Kids Club calendar will be available when the school district finalizes the calendar for the upcoming 2016–2017 school year. Full Members : \$39/day Program/Public: \$54/day

Below is a list of contact people who can answer questions about our school-aged before and after care programs.

General Program Information	Julie Nichols ext. 24
Kids Club days, Young Leaders, 6–8 <sup>th</sup> grades & teen programs	Gary Karp ext. 34
Registration, bank draft billing, cancellations, changes or additions to care	Gina Kapa ext. 61
Scholarship, Open Doors	Colleen Davis ext. 23

If you have any questions, please do not hesitate to call or e-mail us at the Brandywine Y.

Sincerely,

Julie Nichols  
Child Development Director  
478-9622, ext. 24  
jnichols@ymcade.org

Gary Karp  
Child Development Director  
478-9622, ext. 34  
gkarp@ymcade.org

# YOUTH PROGRAM INFORMATION SHEET

2016-2017

PLEASE ONLY LIST ONE CHILD PER FORM AND ATTACH A RECENT PHYSICAL WITH IMMUNIZATIONS

School Attending \_\_\_\_\_

Grade entering 2016-17 \_\_\_\_\_

AM Care ☐ Yes ☐ No PM days: ☐ M ☐ T ☐ W ☐ R ☐ F

## Child's Information

Name	DOB / /	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Age
<input type="checkbox"/> African American/Black <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Indian <input type="checkbox"/> other			
<b>Concerns/special needs</b>			
<b>Dual language families</b> Please list the main language used at home.			
<b>Allergies</b>			
<b>Medication</b> Does your child take prescribed medications? If yes what kind Side effects (medication administration form required for our staff to administer)			
<b>Email Address</b>			

## Parent/Guardian

Name	Relationship to child	DOB / /
Address	City	State Zip
Home Phone	Cell Phone	Work Phone
Place of Employment	Hours of Employment	

## Parent/Guardian

Name	Relationship to child	DOB / /
Address	City	State Zip
Home Phone	Cell Phone	Work Phone
Place of Employment	Hours of Employment	

**Is there a custody/visitation agreement?** ☐ Yes ☐ No If yes, please attach the supporting documentation.

**Military** Do any family members currently serve in the military? ☐ Yes ☐ No Branch of service:

## Insurance Information

Insurance Company	Policy #
Family Physician	Physician Phone
Family Dentist	Dentist Phone

PLEASE LIST ANY ADULTS, OTHER THAN PARENTS, THAT MAY BE CONTACTED IN AN EMERGENCY.

Name	Relationship to child	Phone 1	Phone 2
Name	Relationship to child	Phone 1	Phone 2

**PLEASE LIST ADULTS WHO ARE AUTHORIZED TO PICK UP THIS CHILD**

Name	Relationship to child	Phone 1	Phone 2
Name	Relationship to child	Phone 1	Phone 2
Name	Relationship to child	Phone 1	Phone 2
Name	Relationship to child	Phone 1	Phone 2

**PLEASE LIST ANY ADULTS, THAT ARE NOT AUTHORIZED TO PICK UP THIS CHILD**

Name	Relationship to child	Phone 1	Phone 2
Name	Relationship to child	Phone 1	Phone 2

**PARENT/GUARDIAN SIGNED RELEASES**

**Treatment/ Emergency care** – I hereby give permission to the emergency care physician and/or YMCA director to order X-rays, routine tests, treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for my child. In the event, I cannot be reached in an emergency I hereby give permission to the physician selected by the YMCA supervisor to secure and administer treatment, including hospitalization, for the person named above.

**Signature**

**Field Trip and Transportation release** – The Y has permission to take my child on all pre-arranged field trips indicated as part of the Y program my child is registered for. This includes off site outings due to extreme weather conditions as part of summer programs.

**Signature**

**Photo/video release** – I give permission for my child to be photographed and/or interviewed for promotional purposes.

**Signature**

**Sunscreen release** – I give permission to apply sunscreen provided by me or from the sunscreen machine during summer programs.

**Signature**

**Screen Time Usage** – I give permission for my child to use computers and view interactive age-appropriate and educational videos. Screen time will be less than 30 minutes.

**Signature**

**Receipt of Parent Handbook** – I acknowledge that I have received, read and understand the Parent Handbook.

**Signature**

**Informed consent** - I understand that the YMCA activities have inherent risks and I hereby assume all risks and hazards incident to my family's participation in YMCA activities. I further waive, release, absolve, indemnify and agree to hold harmless the YMCA, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees, as well as, persons or parents transporting participants to and from activities from any claims or injury sustained during my use of YMCA property.

**Signature**

Please provide any additional information about your child's behavior and/or physical, emotional, mental health behavior we should be aware of

Does your child have an ☐ IEP ☐ IFSP ☐ 504 If yes, please share with YMCA director

### **PARENTS RIGHT TO KNOW NOTICE**

Under the DELAWARE CODE you are entitled to inspect the active record and complaint files of any licensed child care facility. To review a child care facility record located in New Castle County contact Ms. Ann Bercy, at (302) 892-5800 at the Office of Child Care Licensing, 4417 Lancaster Pike, Building #18, Wilmington, DE 19805. To review a child care facility record located in Kent or Sussex County contact Ms. Naomi Gosch at (302) 739-5487 at the Office of Child Care Licensing, 821 Silver Lake Blvd., Ste 103, Dover, DE 19904.

You may also view substantiated complaints and compliance review histories for the past three years by visiting <http://www.apex01.kids.delaware.gov:7777/occl/>

I acknowledge I received this notice as part  
of the application packet

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**STATE OF DELAWARE**  
**DEPARTMENT OF SERVICES FOR CHILDREN,**  
**YOUTH AND THEIR FAMILIES**  
**OFFICE OF CHILD CARE LICENSING**

Family Child Care  
Large Family Child Care Home  
Day Care Center

NAME \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

**CHILD HEALTH APPRAISAL**

**SECTION A: TO BE COMPLETED BY PARENT BEFORE PHYSICAL EXAMINATION**

CHECK IF CHILD HAS PROBLEMS WITH ANY OF THE FOLLOWING: GIVE ADDITIONAL COMMENTS BELOW

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Allergies<br>(food, medicine, bee sting etc.) | <input type="checkbox"/> Frequent Colds     | <input type="checkbox"/> Fainting          | <input type="checkbox"/> Physical Handicap |
| <input type="checkbox"/> Constipation/Diarrhea                         | <input type="checkbox"/> Hearing Difficulty | <input type="checkbox"/> Speech Difficulty | <input type="checkbox"/> Behavior Problem  |
|  | <input type="checkbox"/> Seizures           | <input type="checkbox"/> Vision Difficulty | <input type="checkbox"/> Asthma            |

Other \_\_\_\_\_

Comments: \_\_\_\_\_

ADDITIONAL INFORMATION ABOUT YOUR CHILD (include serious illness, accidents, operations, medications, etc. with dates):

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION B: TO BE COMPLETED BY EXAMINING PHYSICIAN/PEDIATRIC NURSE PRACTITIONER**

CODE: X - Within Normal Limits O - See Remarks Below

_____ Scalp, Skin	_____ Heart	_____ Vision	_____ Ear, Nose	_____ Lungs
_____ Hearing	_____ Throat	_____ Abdomen	_____ Blood Pressure	_____ Eyes
_____ Genitalia	_____ Teeth	_____ Extremities	_____ Neck, Glands	_____ Nervous System
_____ Height	_____ Weight			

REMARKS AND RECOMMENDATIONS: \_\_\_\_\_

IS CHILD PROGRESSING NORMALLY FOR AGE GROUP? \_\_\_\_\_

DTP/Hib 1 / /	DTP/Hib 2 / /	DTP/Hib 3 / /	DTP/ Hib 4 / /	DTaP/Hib 4 / /
DTP/DTaP 1 / DT / /	DTP/DTaP 2 / DT / /	DTP/DTaP 3 / DT / /	DTP/DTaP 4 / DT / /	DTP/DTaP 5 / DT / /
Td 1 / /	Td 2 / /	Td 3 / /	/ /	/ /
OPV/IPV 1 / /	OPV/IPV 2 / /	OPV/IPV 3 / /	OPV/IPV 4 / /	TB Screening 12 mo / /
MMR 1 / /	MMR 2 / /	HepB 1 / /	HepB 2 / /	HepB 3 / /
Hib 1 / /	Hib 2 / /	Hib 3 / /	Hib 4 / /	Hep B/Hib 1 / /
Hep B/Hib 2 / /	Hep B/Hib 3 / /	Varicella 1 / /	Varicella 2 / /	Influenza 1 / /
Influenza 2 / /	Pneumococcal Polysaccharide1 / /	Pneumococcal Polysaccharide 2 / /	Pneumococcal Conjugate 1 / /	Pneumococcal Conjugate 2 / /
Pneumococcal Conjugate 3 / /	Pneumococcal Conjugate 4 / /	Hep A 1 / /	Hep A 2 / /	Lyme Vax 1 / /
Lyme Vax 2 / /	Lyme Vax 3 / /	Other: / /	Lead Screening 12 mo / /	

Examiner's Signature \_\_\_\_\_ ☐ M.D. ☐ P.N.P. Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Telephone: \_\_\_\_\_



### Paying for School's Out on the Bank Draft System.

I hereby authorize the YMCA of Delaware to initiate debits to the bank/credit cards indicated below and authorize the bank to debit my account. I also understand this account will be valid for child care payments up to 5 years, 6 years for Kindergarten and it is my responsibility to inform the YMCA of any changes or cancellation of payment.

Are you a YMCA of DE member? ☐ Yes ☐ No

\_\_\_\_\_  
Signature

Please direct billing questions to the Child Care Registrar at the Brandywine YMCA, 478-9622, ext. 61.

#### Parent/Guardian

Name \_\_\_\_\_

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

Name (s) of children and the program(s) they are participating in:

Name	Program	Amount each payment
_____	_____	_____
_____	_____	_____

#### Choose your payment option

You must choose one option below to process your registration. Drafts will occur on the

☐ 1st ☐ 15<sup>th</sup> ☐ split on the 1<sup>st</sup> and 15<sup>th</sup>.

☐ I am currently on bank draft. Please use the credit card on file ending in \_\_\_\_ \_

☐ Please use the checking account on file.

☐ I am authorizing a NEW bank draft from my checking account and I have attached a voided check.

Authorized Signature \_\_\_\_\_

☐ I am authorizing a NEW credit card draft and I have provided all the information below

**Credit card type** ☐ Visa ☐ Master Card ☐ Discover ☐ AMEX

Name on card	Authorized Signature
Card Number	Expiration Date
Billing Zip code	

#### Please sign

I understand if the YMCA is unable to draft a payment due to insufficient funds the overdue payment and the current tuition payment will both be deducted the following month.

Signature \_\_\_\_\_



# Brandywine Y School's Out



## Parent Handbook 2016-2017



## **Mission Statement**

The YMCA of Delaware is an association of people of all ages, ethnic groups and religious affiliations that strives to cultivate the human potential, self-esteem and dignity of all people. Our organization exists to develop and practice the Christian principles of love, caring, inclusiveness, justice and peace...and to enrich the emotional, physical and social life of individuals, families and our community.

## **Program Overview**

Welcome to the Brandywine Y School's Out program! Our program is licensed by the Department of Services for Children, Youth and Their Families, participate in the Delaware Stars program and use the YMCA school age care curriculum frame work. We use these resources and others to provide a well-rounded, quality, safe and fun programming for all. The YMCA framework has eight core content areas:

## **Character Development:**

The Y's four character values of Caring, Honesty, Respect, & responsibility are taught, modeled, and demonstrated by our staff in daily activities. Each character value is associated with a specific color to help children identify the four values.

RED ...is for caring from the heart

YELLOW ...is for respect, follow the "golden rule"

GREEN ...is for responsibility, we have a responsibility to take care of our earth

BLUE ...is for honesty, being "True Blue"

## **Health, Wellness and Fitness – CATCH – Coordinated Approach To Child Health**

A program designed to promote behaviors that assist in developing and maintaining good health in school age children. CATCH is sponsored by Nemours Health and Prevention Services with the primary goal of promoting good nutrition and physical activity through fun and games.

## **Homework support**

We will provide 30 minutes or less to help your child with their homework. A homework center will be provided throughout the afternoon but we will encourage the children to participate in other activities offered.

## **Literacy**

Literacy is a core component in YMCA school-age program and is just one way we help support a child's success in school without extending the school day with academic activities. Literacy includes life skills such as reading, writing, speaking, gathering information, using information, thinking critically, understanding others and expressing oneself.

## **Science and Technology**

Children are fascinated by science and technology. We enjoy tapping into their natural curiosity. We provide hands on learning to help understand how things work. How the decisions we make about the earth affects the quality of life for ourselves and for others. Appreciating the process needed to be undertaken in order to figure out why and how things occur.

## **Service Learning**

Service learning incorporated volunteering and community involvement and goes beyond them. It is a deliberate process through which people of all ages can develop membership and program specific skills, knowledge and behaviors while making contributions to their community and developing civic awareness.

## **Social Competence and Conflict Resolution**

Children, youth and adults feel safe, understood, respected and secure so that learning can take place. Social competence and conflict resolution activities are used regularly, help our program to be emotionally and socially comfortable place to be. These activities give children strategies for dealing with conflict when it comes their way and help them develop socially acceptable ways of interacting with one another.

## **Y of Delaware School-age Program Goals**

To support and strengthen the family unit

To help children develop to their fullest potential

To develop and strengthen the character values of caring, honesty, respect and responsibility

To improve interpersonal relationships: Learn to care about, communicate with and cooperate with family, friends and significant adults in their life

To help children lead healthy lives: Learn ways to be active and to make healthy food choices.

In addition, the Y believes children should have free, unstructured time set aside each day for exploration of their world. Under staff supervision, activities will be chosen by the children and take place both indoors and outdoors for no less than one hour, weather permitting. In case of excessive heat (above 90°) or cold (below 32°), activities planned outdoors will be moved indoors.

The program will be using the CATCH program (Coordinated Approach to Child Health) curriculum to plan physical education time for children. Along with the physical component of CATCH we will also be using the CATCH heart healthy curriculum to teach children about healthy eating and lifestyles.

## **Inclusion**

The YMCA of Delaware child care programs welcomes all children and their families. We follow the YMCA of the USA's values of caring, honesty, respect and responsibility to guide and nurture the children in our care. We respect and value input from parents and encourage families to share information about their child. We will use the information to provide appropriate learning environment for all, as applicable. In addition, if your child has an IEP/IFSP, we request that you provide a copy to the director of the program. It is beneficial to meet with the parent/legal guardian to review the plan and work together to ensure that the guidelines are understood. Children with special needs and children developing typically will be together in our program to support all opportunities for learning. We are determined to provide a safe and secure environment where all children are respected and valued in an atmosphere conducive to learning and making friends.

## **State Licensing Requirements**

We believe that licensing and rigid enforcement of standards are in the best interest of all children. Our center complies with applicable licensing regulations and standards according to the State of Delaware and the Y. These standards relate to our facility, staff and safety procedures.

## **Delaware Stars**

Delaware Stars for Early Success is a quality rating and improvement system (QRIS), which is a method used to assess, improve and communicate the level of quality in early care and education and school-age settings. It establishes quality standards for programs and provides technical assistance and limited financial support to programs involved in Stars as they engage in quality improvement efforts. Delaware Stars is designed as a voluntary system that expects programs to work on improving quality by moving up the Star levels. We participate in the Delaware Stars program because we believe in continual quality improvement. The Stars program helps us focus on quality indicators such as staff trainings, staff/child ratios, curriculum policies, procedures and a variety of activities.

## Staff Information:

Y staff provide a safe and nurturing environment for children, while implementing age appropriated activities. The following are required of all staff to ensure that children receive a high quality experience.

- Background Checks
- Fingerprinting
- Delaware Adult Abuse Check
- YMCA New Staff Orientation
- Child Abuse Prevention Training
- CPR Certification
- First Aid Certification
- Annual Child Development Training (9 hours)
- Quality Assured Trainings

## Child Abuse

Employees complete an extensive child abuse prevention training program. Supervisors and managers complete additional training to further promote a child-safe environment. All staff members are mandated to report any suspected child abuse.

If you have any questions or concerns regarding a Y staff person or program, please inform the program director, associate executive director or executive director at your location. You can make a confidential report to Ethics Point on our web site, [www.ymcade.org](http://www.ymcade.org).

Please assist us in creating the most child-safe environment possible:

- Talk to your child about his/ her experiences in Y programs, school, sports, and other activities
- Drop in on your child's programs.
- Trust your instincts. Don't wait to tell us if something seems "strange." Speak up!
- Watch for warning signs of abuse
  - Unexplainable bruising or other physical markings
  - Disturbed sleeping or eating patterns
  - Abrupt changes in behavior-anxiety, clinging, aggressiveness, withdrawal, depression
  - Fear of a certain person or place
  - Discomfort with physical contact
  - A child who abuses other children
- Listen and watch for signs of your child receiving special attention that other children are not receiving, including favors, treats, gifts, rides, increasing affection or time alone, particularly outside the activities of school, child care, or other activities
- Every once in a while, ask your child these questions:
  - Is anyone scaring or threatening you?
  - Is anyone asking you to keep secrets?
  - Has anyone said anything to you that made you feel bad?
  - Is anyone touching you in a way that you don't like?
- Encourage your child to tell you or another trusted adult if anything happens to him or her

## Transition Policy

- We recognize that changes in schedules can be stressful for both parents and children.
- For this reason we provide opportunities for families to get to know us prior to starting our program, during the school year and into the summer.
- Orientations for new and returning families coincide with the school's open house/back to school night or walk through to give parents and students the opportunity to visit the area care is provided and participate in examples of activities. The school will notified us of the scheduled date and time.
- Families signing up after the open house can discuss the program with the director and if time permits, a staff member from the Y school site will call the student's family prior to their start date. The staff introduces themselves and asks you about your child's likes, interests or concerns, and answers any questions you have about the program.
- We encourage families to visit and participate in activities with their child. We also invite our families to participate in our community/family events-Healthy Kids Day, Fall Fest, Hoopla, Ice Cream Social and Art Fest held at the Brandywine Y and Hanby Outdoor Center.
- As the school year comes to an end the Y will provide information about summer activities for families and inform them about camps and classes the Y offers. Students completing our program will be given information about our older youth programs and tips for kids staying home. If interested, we will introduce families to the staff people who run specific programs.

## Holidays

School's Out is not open on Labor Day, Thanksgiving, the Friday following Thanksgiving, Christmas Eve, Christmas Day, New Years Eve, New Years Day, winter vacation, Good Friday, spring vacation and Memorial Day.

## Calendar and/or Days Off

School's Out follows the Brandywine School District calendar. A copy of the School's Out calendar is provided before the start of school. Kids Club at the Brandywine Y site is when schools are closed.

## Inclement Weather Policies/Early Dismissals/Late Openings

**Please check your email frequently during inclement weather for early dismissals and closing announcements. Updates are also posted on Facebook, Twitter, Y website, ymcade.org, or listen to WSTW. We will be announced as the Brandywine YMCA School's Out program. If you would like a text alert text the keyword @BRYCARE to 302-266-2160 to register.**

### **The following are the YMCA inclement weather policies.**

If school is opening late, care is provided only for students registered in morning care.

If school opens:

**1 hr late – AM care starts at 8:00 am**

**2 hrs late – AM care starts at 9:00 am**

### **If school closes early for any reason**

You are encouraged to pick up your child as soon as possible. There is no transportation provided by the YMCA for early dismissals. Staff will report to school sites early and stay with children until they are picked up. No credits will be issued for tuition due to inclement weather.

### **If school is closed...**

Kids Club is available at the Brandywine Y site 7:30 am – 6:00 pm. There is an additional fee for all Kids Club days. Payment is necessary at the time of registration (does not pertain to POC clients).

If there is a state of emergency ..

Y will close and care is cancelled.

## **Absentee Procedures**

If your child will not attend School's Out on a regular school day, please notify the YMCA 30 minutes prior to dismissal. Messages can be left for the sites at the Brandywine Y, 478-9622, ext. 24, or e-mail [jnichols@ymcade.org](mailto:jnichols@ymcade.org) with your child's name and site location.

## **Y Kids Club**

Held at the Brandywine Y from 7:00 am. – 6:00 pm on professional and single day school holidays, and weather school cancellations. An additional fee is required.

- Tuition/Parent Fee due at the time of registration. (Does not pertain to POC)
- Full member: \$39/day; program/non-member: \$54/day
- An additional fee is required for trips.

Children will be busy with games, active play, and free time to play with their friends. They also need their bathing suit and towel for recreational swimming. A pizza lunch and afternoon snack is provided. If your child does not like pizza, you will need to pack a lunch. We are a nut free facility. Please do not send any nuts or nut products in your child's lunch. Registration forms are available at the front desk of the Brandywine Y. Register early; space is limited.

## **Holiday Kids Club**

Held during winter and spring breaks at the Brandywine Y site. Registration will be open to those enrolled in School's Out prior to any offering to the general membership. An additional fee is required. Does not pertain to POC

## **Communications**

Parents will be given written communication each week from the site coordinator. It will include activities, any changes in room schedule, school events that affect the after school program. Communications will be in the form of a newsletter, informational sign, such as a typed note, or dry erase board.

Parents will receive a monthly newsletter from the director each month with news about sites, staff information, days off and upcoming events with the program or at the Y.

## **YMCA of USA Before and After School Survey**

The YMCA of Delaware will use the YMCA of the USA before and after school survey annually. We will inform you in the newsletter and by email prior to receiving the online survey. Please take the time to fill it out as we will use the results to make improvements to our program for your children. Also if you have suggestions or concerns, please do not hesitate to call our director, 478-9622.

## **Observation & Assessment and Parent/staff Conferences.**

Site staff will do observations & assessment of children twice a year (October and April). The assessment has three parts; caregiver observations, child's questionnaire and parent questionnaire. Parent/staff interviews will be conducted twice a year to share our observations at parent's convenience. This time will give parents the opportunity to discuss any matters relating to their child's care and for staff to update parents on activities and their child's development. Parents are welcome to visit their child's site anytime during the School's Out operating hours.

## **Positive Guidance**

1. Staff will look for every opportunity to redirect non-productive behavior into more positive behavior
2. Staff may remove a child from a group to allow him/her an opportunity to calm down and then rejoin the group
3. Responses to a child's behavior will be developmentally appropriate.

# Health & Safety

## Medical

Please notify us of any food, drug or insect allergy or physical limitations. A physical form is required for each child before they can participate in our program. Lead screening must be done on all children. Parents will be notified if your child has been exposed to a contagious disease. Health Consultant, Dr. Bernard King will provide consultation on both routine and emergency health care for our center. Medical back-up for the center will be provided by the Dupont Hospital for Children.

We take every precaution in the School's Out program to keep your child healthy, and we ask that you please cooperate with us by keeping an ill child at home.

## Administration of Medication

Medications can be kept at the site and administered when necessary. Medication will only be given to the child whose name appears on the label. Expired medication will be returned to the parent or discarded.

## Accident or Injury

If your child is injured during School's Out hours the following procedures will be followed.

- First aid will be administered
- Parents will be notified
- Emergency medical care will be called if necessary
- Accident report is filed at Y branch and a copy kept at site

## Health Exclusion

Children will be sent home or should be kept home for the following:

- **Fever of 101 degrees**  
Prior to returning to school, child must be fever-free for 24 hours after being sent home with a fever.
- **Vomiting or diarrhea**  
Diarrhea will be determined either by the frequency of bowel movements or the consistency.
- **Severe cough or sore throat**  
which interferes with the child being able to participate in daily activities.
- **Rash** - Child will need a note from physician stating that the rash is not contagious prior to returning.
- **Discharge from eye or eyes**- red eye or eyes with discharge.  
Child will be excluded from returning until 24 hours of treatment has been completed.
- **Excessive lethargy, irritability or congestion**  
inability to stay awake – labored breathing – unusual behavior for the child.
- Symptoms which include any of the following: **chicken pox, impetigo, lice.**
- **Severe ear pain** which limits the child's participation in daily activities.

If your child becomes ill during the course of the day, it will be the parents responsibility to pick up the child within **one hour** of notification. If a child is sent home due to illness, he/she may not return for 24 hours unless you have a note from a doctor stating it is safe for the child to return.

If your child becomes infected with a contagious disease, please notify the director immediately so we can notify other families whose children may have been exposed.

## Emergency Contacts

Fact sheets are kept on file. In case of illness or injury, this information is used to notify and advise you or the person(s) designated by you of the child's status. It is extremely important that the information be kept current with correct phone numbers. Emergency contact forms are due prior to the first day of the program. If the following information should change at any time, please notify us so that we may better serve you and your child:

1. Phone numbers where you can be reached during the day
2. Home and work addresses
3. Names of authorized persons who may be contacted in case of an illness or injury
4. Names of all persons authorized to pick up your child

## Sign in/Sign Out

For the safety of every child, parents and/or adult guardians are required to sign in and/or sign out on a daily basis. Under no circumstances will children be released to anyone who is not on the authorized to release portion of the child's registration form. If it becomes necessary for someone other than those listed, please call and verify. Your child's security ID number and a photo ID must be shown at time of pick up.

## Hours of Operation

Before School Care: 7:00 am until school begins  
After School Care: End of school-6:00 p.m.

## Site Locations

Children are served at the school site they are attending.

Carrcroft Elementary  
Cafeteria  
503 Crest Rd  
Wilmington, DE 19803

Claymont Elementary  
3401 Green St  
Claymont, DE 19703

Forwood Elementary  
Cafeteria  
1900 Westminster Drive  
Wilmington, DE 19810

Hanby Elementary  
Cafeteria  
2523 Berwyn Rd  
Wilmington, DE 19810

Harlan Elementary  
3601 Jefferson St  
Wilmington, DE 19802

Lancashire Elementary  
Cafeteria  
2000 Naamans Road  
Wilmington, DE 19803

Lombardy Elementary  
Cafeteria  
411 Foulk Road  
Wilmington, DE 19810

Mt. Pleasant Elementary  
Cafeteria  
500 Duncan Road  
Wilmington, DE 19809

Staff will provide emergency phone number at the site for use during operating hours. All other calls should be directed to the the Schools Out Director, 478-9622, ext. 24. **Do not call** the Brandywine School District administration offices in regard to our program

## New Student Registration

We accept registration on a first come, first served basis. **When you register for the Before and After School program at the Brandywine YMCA, your child will be registered continuously from year to year for grades K-5.** All current information in our system will be used for the next year-address, authorized pick up, phone numbers, payment information, etc. If you need to make changes to any of this information, you will need to contact the School's Out Registrar, 478-9622, ext 61. Registrations cannot be accepted without a completed physical form, signed by your child's physician. A copy of your child's school physical is acceptable.

## Returning Student & Sibling Registration

You will receive a School's Out fact sheet to fill out the school and days needed for the new school year. All current information in our system will be used for the next year-address, authorized pick up, phone numbers, payment information, etc. If you need to make changes to any of this information, you need to contact the School's Out Registrar, 478-9622, ext 61.

If a sibling of a currently enrolled student will be starting school in the fall, a new student parent packet will be available at the front desk of the Brandywine Y at the time of returning registration. All new students must fill out all this information and include a copy of a current physical.

## Tuition/POC Parent Fee

All families will be set up on bank draft using your checking, savings, debit or credit card accounts. Tuition can be deducted on the 1<sup>st</sup> or the 15<sup>th</sup> of each month, or you may choose to split the payment. Deductions begin in September and end in May. Statement billing is not available.

## Financial Assistance

Anyone wishing to apply for financial assistance will need to apply first to Purchase of Care through the State of Delaware. Information on applying can be found at <https://assist.dhss.delaware.gov/>. If denied by POC, please bring in denial letter and then apply for YMCA Open Doors financial assistance. Current recipients need to reapply for the 2015-16 school year.

All POC paperwork must be received from the State of Delaware by our billing department prior to your child starting the program. If a parent payment is required, bank draft form must be filled out and turned in at time of registration.

## Monthly Tuition Rates 2016-2017 (does not pertain to POC)

1 day/wk	\$114/mo
2 days/wk	\$183/mo
3 days/wk	\$267/mo
4 days/wk	\$322/mo
5 days/wk	\$359/mo
Am Care	\$125/mo

There is no discount for siblings. Kids Club days and Holiday Kids Club are not included in the monthly tuition nor is tuition less during the months that include Kids Club days.



## **Changes in Your Child's Schedule**

We require a written notice of cancellation to the School's Out director one week prior to your child's last day in the program. The notice should list the date of the last day your child will be attending, and the reason for leaving if you wish to share this information. If there is any change during the school year to your child's attendance that would effect the monthly tuition deduction, please email Gina Kapa, rkapa@ymcade.org or call, 478-9622, one weeks prior to the date of your withdrawal or changes. If you are changing the account where your payment is deducted, you will need fill out a new SIGNED bank draft/credit card form enclosed with this packet. If we do not hear from you, we assume your child is attending School's Out or Kids Club and will charge your account as you requested. If an automatic withdrawal (EFT) is rejected twice for insufficient funds, the EFT will be cancelled and your tuition must be paid with cash or a money order.

## **Withdrawing from the Program**

We understand that schedules change during the school year. If you need to withdraw your child from the program, we need to be contacted within one week of final date. Upon withdrawal, please be advised that unused tuition for the month will not be refunded (*does not pertain to POC clients*), and you will not be guaranteed a space to return to the program in either the current or succeeding year.

## **Afternoon Snack**

Each afternoon, children in School's Out receive a nutritional snack. If your child is allergic to any food products, please inform us and plan to pack a snack from home. A monthly menu is posted at each site and a copy will be available to parents. If your child does not care for the snack being offered, please pack a snack from home.

## **Lost and Found**

If your child is missing anything, please inquire at the site as soon as possible. Remember to label everything. Unclaimed items are given to charity after a reasonable period of time. We strongly encourage parents not to send their child to school with money, jewelry or other valuables. We are not responsible for any lost items.

## **Video and screen time**

Because of our HEPA (healthy eating physical activity) policies, the Y after care sites have eliminated video viewing. We do have a permission release in the registration form for viewing of computers for educational purposes. These computer sessions are monitored by our staff and limited to educational programs with limited viewing times of 30 minutes or less.