



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

School-Age Care Parent Handbook

Blair Family YMCA

PROGRAM OVERVIEW

In the YMCA Before and After Care Program children participate in a balanced program of open play and structured activities. Every activity is carefully designed to spark your child's imagination and encourage lifelong positive values. Program components may include but are not limited to recreation, health enhancement, arts, music and humanities, nutritional snacks, service learning, character development, and homework assistance. YMCA Before and After School staff members ensure that children are given a unique mix of activities that focus on developmental assets, which are the building blocks that teach children how to make positive decisions.

***Due to the current Covid-19 circumstances the YMCA Before and After Care will only be allowed to accept 60 children into the before school and 60 children into the after school program. This is subject to change with CDC/DHHS guidelines.**

HOURS, DAYS AND MONTHS OF OPERATION

School age programs operate from 6:00 a.m.– 6:00 p.m. Monday through Friday. The program begins in August and ends in May. The program will follow the Blair Community School's calendar and adjust for holidays and early release days based on that calendar.

ARRIVAL PROCEDURES

The Y's responsibility for your child begins when:

- Your child enters the YMCA After School program space and is checked in by Y staff.
- Your child is brought into the YMCA Before School program space and checked in by the parent/guardian.

DEPARTURE AND RELEASE PROCEDURES

Parents must enter the building and sign their children in and out of our program. This ensures child safety and compliance with state licensing. The child will only be released to his/her parent and/or those adults that the parent(s) 18 years or older, specifically designate on the enrollment form. Amendments to the release section of the enrollment form must be submitted in writing by the parent or guardian who completed the form. If a parent is not allowed to pick up a child, the center must have a copy of the court order signed by a judge. Without this documentation, we are obligated to release a child to either parent. The Y will only follow what the court order states.

HEALTH AND SAFETY (ILLNESS AND EXCLUSION CRITERIA)

In order to protect the health of all children in our care, please keep your child at home if you notice that he/she begins to show signs of Covid-19, illness or a contagious disease or if he/she feels too ill to participate in a group care setting. Please let us know as soon as possible if your child has tested positive for Covid-19, has a communicable illness or infection. Children who test positive for Covid-19 will not be allowed to return to the program until it has been 10-14 days since testing positive and the child is symptom free. Children who have an illness or another communicable condition may not return to care for 7 days and the child is symptom free which includes not having a fever above 100.4 for 48 hours prior to returning without medication.

Children with head lice or nits will not be allowed to attend the before and after school program. If any lice or nits are found on a child they will be immediately sent home and may not return until they are free of live bugs and nits as well. All parents will be notified by the email address we have on file for them. We will also post a sign on our Childcare room upstairs.

If your child becomes ill during the program day, we will contact you to pick him/her up.

MEDICATION POLICY

Regular and ongoing medication can be administered on-site. For emergency medication, please complete a medication form. This form requires you to note the specific dosage your child is to be given. All medications must be accompanied by prescription or written permission from the child's parent and must be in the original container with your child's name and all labels intact.

MEDICAL EMERGENCY

In the case of a medical emergency, we will call 911 and contact the child's parents/ guardians. Responding emergency medical personnel will make any determinations as to if the child should be transported to a hospital. We will provide them with the information from your child's records as to your choice of hospital and physician. In the event that this information is not specified, the child will be transported to the nearest available hospital.

IMMUNIZATIONS

Immunization records must be current and on file.

PARENTAL NOTIFICATIONS

Parent notifications may be made in writing via letters, emails, flyers and/or signage at the Welcome Desk. Notifications may also be made by phone calls or directly in person by site staff. Open communication is very important to the success of your child's Y experience. Activity schedules, menus and other pertinent information will be available for you upon asking. Parents are welcome visitors to our program. Please check daily for posted notices, flyers or other information about program activities. We appreciate input regarding program expectations, suggestions, ideas and comments on ways to improve our service to you and your family.

DISCIPLINE AND GUIDANCE PROCEDURES

Self-management skills and positive social interactions among children and adults are encouraged and maximize everyone's enjoyment of the program. The Y programs use positive guidance methods including reminders, distraction, logical consequences and redirection. Self-management skills are taught according to the following guidelines:

- Consistent rules are clearly stated. Children are expected to work and play within known limits.
- Behavior expected of children is age appropriate and according to development level.
- An atmosphere of trust is established in order for children to know that they will not be hurt nor allowed to hurt others.
- Staff members strive to help children become acquainted with themselves and their feelings. This will help them learn to cope with their feelings and control them responsibly.

Child safety is the most important concern of the program; therefore, children whose behavior is dangerous or repeatedly disruptive must be immediately picked up from the program by someone designated through the departure and release procedures. Repeatedly disruptive or dangerous behavior will be discussed with the child's parent and will result in loss of privileges or activities, suspension or termination from the program.

SNACKS (FOOD SERVICE PRACTICES)

An afternoon snack is provided each day. This snack will meet USDA requirements. Morning breakfast snack will be provided on Fridays due to PLC late start. Morning snack for Monday thru Thursday's will be contingent on the decisions that the Blair Community Schools make regarding start times.

If you send an additional snack with your child, please ensure that it does not contain **any** form of peanut products.

CHILD'S BELONGINGS

Children should be dressed for active indoor and outdoor play. A change of clothes is recommended. Items brought to the program must be labeled and we expect children to be responsible for their personal belongings. Cubbies are provided for each child. Please leave personal toys, money, video players, iPods or anything electronic at home. The YMCA is not responsible for lost, damaged or stolen items.

ENROLLMENT PROCEDURES AND NOTIFICATION OF POLICY CHANGES

Enrollment forms can be accessed online under the child care section of the website at www.blairymca.org or at the Welcome Desk. To comply with state licensing laws, all sections of the enrollment forms must be completed entirely before we can accept any child for care. Physician and hospital information are required and it is strongly recommended that you list three emergency contacts. Please note that it may take up to 48 hours for paperwork to be processed. Paperwork must be processed entirely before your child may begin the program. Any policy changes will be provided to participant's parent or guardian in writing.

ACCOUNTING POLICIES AND PROCEDURES

We are now only have an automatic payment option. Payments will be drafted on the Monday after attendance. It is the responsibility of the families enrolled in YMCA Child Care Programs to have funds available on the date of the scheduled draft. The YMCA will draft from one account only. In the event a payment is returned, the Y will automatically redraft and will include a \$25.00 returned payment fee. Three or more returned drafts in a school year may result in termination from the program.

Receipt Request

If you are in need of a childcare payment receipt you may choose from a couple of options.

- 1: **Hand written receipt** when you contact the Welcome Desk.
- 2: **Collective payment receipts** will be provided on a monthly basis. This will provide you with your total amount paid to the YMCA childcare programs.

Financial Assistance

Financial assistance is available for those who qualify. Please see the Welcome Desk to inquire or pick up the forms.

Extra Charges

1. \$25.00 Registration: This fee is non refundable and non transferable. For new registrations only.
2. Late Pick Up: The Before and After program ends at 6:00 PM at which time all children need to be picked up. Any child who is not picked up by this time will be charged \$1.00 per child per minute.
3. Returned Payments: will result in a \$25 NSF fee

TRANSPORTATION (IF APPLICABLE)

If your child is attending a Y program that requires transportation, we ask that you speak with your child regarding proper safety guidelines. All children must stay seated with their seat belts fastened while the vehicle is moving and until the vehicle is completely parked. Our primary goal when transporting children is to ensure their safety. The Y reserves the right to suspend or dismiss a student if safety procedures and policies are not followed. The Blair Family YMCA transports to all field trips and YMCA related events. We are unable to transport children for any personal camps, lessons or programs.

BUS RULES AND REGULATIONS

While children are on a bus, they are under the direct supervision of the driver and must obey the driver at all times. The bus driver and/or the Blair YMCA staff has the authority to assign seats to students for safety or disciplinary reasons. Failure to follow the driver's rules will be considered an act of disobedience and will result in disciplinary action.

TRANSPORTATION POLICY

The transportation policies were developed to insure the safety of participants and staff as well as minimize the risk involved with vehicle usage.

Driver /Staff Responsibility

Each vehicle will be safety checked prior to and after being used. Any problems noticed during use must be noted and reported. Driver is to maintain head count consistent with records and is also responsible for ensuring that the passenger count does not exceed the legal limit. Prior to departure the driver/staff will educate the passengers as to the Safety and Transportation Rules. All drivers will be trained in Safe With You program through DHHS.

Passenger Responsibility

All passengers must wear seat belts where fitted and remain seated at all times. For the child's own protection, hands, head and arms must be kept inside the bus at all times. Feet and bags must be kept clear of the aisle. Conversations containing offensive language are not allowed and children should avoid any unnecessary, loud or boisterous talking. Fighting or horse play is not permitted and will not be tolerated. General regulations pertaining to the restrictions on the use of tobacco, knives or other weapons, use of profanity and obscene gestures apply to all children riding the bus. Children are expected to help keep the bus clean, sanitary and orderly. Paper or other debris should not be left on the floor of the bus or thrown at other students. No materials should ever be thrown out of the bus windows or doors.

FIELD TRIPS AND WATER ACTIVITIES

One of the many benefits of the Blair Family YMCA is the chance to explore different places. When we are scheduling field trips all information is reported to parents. It is our goal at the Blair Family YMCA to provide music lessons, art classes and cooking classes. Some of these classes may or may not be on the premises. If classes will be provided off of the premises parents will be notified and permission forms will be required. At least two YMCA Staff will always accommodate children on bus during any fieldtrip/activity.

Another great part of the YMCA is the children will have opportunities to swim. The YMCA only allows children to swim in water that is supervised by certified and trained lifeguards.

CHILD ABUSE AWARENESS

All Blair YMCA staff members are mandatory child abuse reporters. Suspected cases of child abuse or neglect must be reported to the Department of Human Services. If there is probable cause to believe child abuse has occurred outside of the YMCA and any of its programs, the employed staff person will make a confidential call to proper authorities (sheriff, police department, or child protection) in consultation with the Executive Director. If there is probable cause to believe child abuse has occurred at the YMCA and/or in any of its programs, the procedure outlined in the Employee and Volunteer Policy Statements will be followed.

EMERGENCY PREPAREDNESS PLAN

Staff members are trained in basic emergency procedures. Necessary responses to issues regarding natural disasters (floods, tornados, etc.), hostile situations and fire escape routes are addressed in staff training. Monthly fire drills and periodic tornado drills are conducted at sites. In the event of a gas leak, your child will be relocated and you will be notified immediately to come pick them up. If evacuation is necessary, staff members will first move children to a designated safe area or alternate shelter known to all employees, caregivers and volunteers. Evacuation procedures also address the care of children with limited mobility or who otherwise may need assistance in an emergency, such as children who have mental, visual or hearing impairments. Head counts and roll sheets will be utilized to account for children and be conducted by two or more caregivers. At all times, our emphasis will be on keeping children safe.

INCLEMENT WEATHER POLICY

If the Blair Community Schools are closed, the Y program will be closed.

If the program is open, but the weather worsens throughout the day, we may ask you to pick your child up as soon as possible so our staff members get home safely.

If the Blair Community Schools calls for a late start the Before school program will open at the scheduled time of 6am and a breakfast snack will be provided.

2020-2021 Before & After School Registration Forms

In the YMCA Before and After School Care, kids engage in physical, learning and imaginative activities that encourage them to explore who they are and what they can achieve. They will get assistance with their homework from YMCA staff members, have a chance to socialize with each other and form long-lasting friendships that enhance their development, growth and self-confidence. Transportation to and from school is provided along with an afternoon snack.

How to Register: The following information must be completed and submitted prior to your child's first day:

- A completed registration form
- A copy of your child's immunization records
- A completed EZ-eft form
- \$25.00 registration fee *New Children only

Ages: 5-13 years and is eligible to enroll in the Blair Schools

Time: 6:00-7:50 a.m. and 3:45-6:00 p.m.

Rates:

Member

Before School:

Monday-Thursday: \$5.00 a day for each child

Fridays due to PLCs: \$10.00 a day for each child

After School

\$8 a day for each child

Non-Member

Before School:

Monday-Thursday: \$10.00 a day for each child

Fridays due to PLCs: \$15.00 a day for each child

After School:

\$13.00 a day for each child

SCHOOL'S OUT FUN CLUB

When school is out, the Y is in! We provided a full day of fun while the kids are out of school. Kids will enjoy themed days with activities, learning and fun. They will do arts and crafts, games in the gym, swim and if weather permits, play outside. Morning and afternoon snack provided, but please bring a sack lunch.

Ages: 5-13 years and is eligible to enroll in the Blair Schools

Time: 6:00 a.m.-6:00 p.m.

Fee: \$30 member/\$60 non-member

Dates: September 25th

November 6th

December 28th, 29th, 30th, 31st

January 1st, 4th

February 12th

March 15th, 16th, 17th, 18th, 19th

April 2nd

*Program will not be open on New Years Eve and New Years Day unless there is a significant amount of kids signed up.

***There is a \$25.00 Registration Fee for New Children**

All information must be filled in completely in order to process your registration.

CHILD INFORMATION

Child #1 First Name _____ MI _____ Last Name _____

Date of Birth _____ Age _____ Grade for 2020-2021 _____ School _____ Gender M/F

Before school After School Both

HEALTH INFORMATION

ANY KNOWN ALLERGIES? _____ Severity: Mild Moderate Severe

ANY KNOWN SPECIAL NEEDS OR HEALTH ISSUES? _____

ANY ACTIVITIES YOUR CHILD MAY NOT ENGAGE IN? _____

Medication, if any: _____ Possible side effects: _____

Will this medication be taken while he/she is in Before and After care? Yes No

Any special devices used (glasses, hearing aids, crutches, etc.)? _____

Does your child have any fears that we should be aware of (insects, water, heights, animals, etc.)? _____

Has any event occurred that could cause emotional concern that we should be aware of? (Death in the family, Divorce, etc.?) _____

Any known intolerance to food, insect bites/stings, or other factors that result in medical reaction? Please provide us with clear instructions in the event of an exposure to the factor. _____

CHILD INFORMATION

Child #2 First Name _____ MI _____ Last Name _____

Date of Birth _____ Age _____ Grade for 2020-2021 _____ School _____ Gender M/F

Before school After School Both

HEALTH INFORMATION

ANY KNOWN ALLERGIES? _____ Severity: Mild Moderate Severe

ANY KNOWN SPECIAL NEEDS OR HEALTH ISSUES? _____

ANY ACTIVITIES YOUR CHILD MAY NOT ENGAGE IN? _____

Medication, if any: _____ Possible side effects: _____

Will this medication be taken while he/she is in Before and After care? Yes No

Any special devices used (glasses, hearing aids, crutches, etc.)? _____

Does your child have any fears that we should be aware of (insects, water, heights, animals, etc.)? _____

Has any event occurred that could cause emotional concern that we should be aware of? (Death in the family, Divorce, etc.?) _____

Any known intolerance to food, insect bites/stings, or other factors that result in medical reaction? Please provide us with clear instructions in the event of an exposure to the factor. _____

CHILD INFORMATION

Child #3 First Name _____ MI _____ Last Name _____

Date of Birth _____ Age _____ Grade for 2020-2021 _____ School _____ Gender M/F

Before school After School Both

HEALTH INFORMATION

ANY KNOWN ALLERGIES? _____ Severity: Mild Moderate Severe

ANY KNOWN SPECIAL NEEDS OR HEALTH ISSUES? _____

ANY ACTIVITIES YOUR CHILD MAY NOT ENGAGE IN? _____

Medication, if any: _____ Possible side effects: _____

Will this medication be taken while he/she is in Before and After care? Yes No

Any special devices used (glasses, hearing aids, crutches, etc.)? _____

Does your child have any fears that we should be aware of (insects, water, heights, animals, etc.)? _____

Has any event occurred that could cause emotional concern that we should be aware of? (Death in the family, Divorce, etc.?) _____

Any known intolerance to food, insect bites/stings, or other factors that result in medical reaction? Please provide us with clear instructions in the event of an exposure to the factor. _____

CHILD INFORMATION

Child #4 First Name _____ MI _____ Last Name _____

Date of Birth _____ Age _____ Grade for 2020-2021 _____ School _____ Gender M/F

Before school After School Both

HEALTH INFORMATION

ANY KNOWN ALLERGIES? _____ Severity: Mild Moderate Severe

ANY KNOWN SPECIAL NEEDS OR HEALTH ISSUES? _____

ANY ACTIVITIES YOUR CHILD MAY NOT ENGAGE IN? _____

Medication, if any: _____ Possible side effects: _____

Will this medication be taken while he/she is in Before and After care? Yes No

Any special devices used (glasses, hearing aids, crutches, etc.)? _____

Does your child have any fears that we should be aware of (insects, water, heights, animals, etc.)? _____

Has any event occurred that could cause emotional concern that we should be aware of? (Death in the family, Divorce, etc.?) _____

Any known intolerance to food, insect bites/stings, or other factors that result in medical reaction? Please provide us with clear instructions in the event of an exposure to the factor. _____

PARENT/GUARDIAN INFORMATION

Mother/Legal Guardian Name: _____

Address: If same as child's check here _____

City _____ State _____ Zip _____ Cell Phone _____

Employed By _____ Address _____

Work Phone _____ Home Phone _____ Email _____

Father/Legal Guardian Name: _____

Address: if same as child's check here _____

City _____ State _____ Zip _____ Cell Phone _____

Employed By _____ Address _____

Work Phone _____ Home Phone _____ Email _____

In Case of EMERGENCY, we should contact the following person(s) if parents cannot be reached:

(Please list names in order you would like them to be called. List at least 2)

A. _____ Phone _____ Relation _____ authorized pick up

B. _____ Phone _____ Relation _____ authorized pick up

C. _____ Phone _____ Relation _____ authorized pick up

D. _____ Phone _____ Relation _____ authorized pick up

AUTHORIZED person(s) to take child from site:

(You must list anyone allowed to pick up your child and they must be over the age of 18)

A. _____ Relation to child _____ Age _____

B. _____ Relation to child _____ Age _____

C. _____ Relation to child _____ Age _____

Is there anyone **UNAUTHORIZED** to pick up or visit your child (children)? Yes No

Name: _____

*If possible please provide a picture

AUTHORIZATION FOR EMERGENCY MEDICAL CARE

I (we) expect to be notified at once in case of an accident or illness to my/our child; I/we will make arrangements for medical care of my/our child with the physician or hospital of my/our choice; if I/we cannot be reached to make the necessary arrangements, I/ we hereby authorize the YMCA to contact:

Dr. _____ at _____

ADDRESS

PHONE

Or the nearest hospital for emergency medical treatment of _____

CHILD'S NAME

Furthermore, I/we certify that my child is, to my/our knowledge, in good health and free of disabilities that would endanger him/ her or other children in the YMCA programs.

MEDICATION PERMISSION AND COMPETENCY

I _____ have determined that the YMCA staff is competent to give or apply medication to my child. I understand that the YMCA has the responsibility to assess the ability of staff to give or apply medication safely and may give or apply medications to my child.

PARENT/GUARDIAN PERMISSIONS

Child #1

- My child has permission to swim during the school year
 My child has permission to swim in the deep end- The deep end is any water above the height of your child's head.

Swimming ability Non-Swimmer Fair Good

Child #2

- My child has permission to swim during the school year
 My child has permission to swim in the deep end- The deep end is any water above the height of your child's head.

Swimming ability Non-Swimmer Fair Good

Child #3

- My child has permission to swim during the school year
 My child has permission to swim in the deep end- The deep end is any water above the height of your child's head.

Swimming ability Non-Swimmer Fair Good

Child #4

- My child has permission to swim during the school year
 My child has permission to swim in the deep end- The deep end is any water above the height of your child's head.

Swimming ability Non-Swimmer Fair Good

PHOTO RELEASE

- I give to the YMCA, its nominees, agents and assigns, unlimited permission to use and publish testimonials, photos, videos, etc. for purposes of advertising and/or education.

Parent/Guardian Signature _____ Date _____

TRANSPORTATION RELEASE

Transportation may be provided by a private provider, a YMCA owned and operated vehicle and/or public transportation systems in the area. I (we) the undersigned understand and authorize the YMCA to transport my child to and from school while enrolled in the YMCA Before and After school program. The signing of this permission slip releases and indemnifies the YMCA and its agents and/or employees from all liabilities, damages and any claims made by the child or on behalf of the child, including medical expenses incurred, should serious injury, loss of property, damages or death occur as a result of his/her participation in the transportation program. We fully understand the nature of the transportation services and the risk of serious injury, loss of property, damages or death associated with these services.

THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "release") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise.

THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releases 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 participation in any program affiliated with the YMCA.

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

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THE RELEASE (Parent and/or Guardian)

List Names of ALL children on the same line: _____

Parent/Guardian Signature: _____ Date: _____

2020-2021 Before and After School Care Payments

PAYMENT INFORMATION

CONVENIENT AUTOMATIC PAYMENT OPTIONS: We require an automatic payment option. Payments will be processed on the Monday after attendance. Please check credit card or bank draft option and fill out the information below.

A \$25.00 NSF fee will be applied to any returned payment.

EFT/BANK DRAFT

Bank Name: _____

Checking Account Number: _____

Routing Number: _____

DEBIT/CREDIT CARD DRAFT

Card Type (Check one): VISA____ MASTERCARD____ DISCOVER____

Credit Card Number: _____ Exp. Date: _____

Name on Card: _____ CVC Number: _____

I hereby request and authorize the Blair Family YMCA to charge my account. The amount depends on the number of days my child attends Before and After care.

Child #1 Name: _____

Child #2 Name: _____

Child #3 Name: _____

Child #4 Name: _____

Parent Signature (required): _____

Parent Email (required): _____

Parent Phone Number (required): _____

Transportation Application for the YMCA Bus

Please print clearly

Name of Student(s)	Grade	School	Medical Conditions
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please mark one

AM/PM Rider _____ AM Only _____ PM Only _____

***Please notify the YMCA front desk @ 402-533-9622 if your child will not be riding the bus to/from the B & A School program on any given day.**

Parent/Guardian:

Cell:

Work:

Emergency Contact

Name: _____

Phone: _____

YMCA Bus Guidelines/Rules:

No Standing until the bus is at a complete stop and the driver says you may get up. Children must be seat belted before the bus begins to move. When children enter the bus they must fill up the seats in the back of the bus first. No saving seats. When the bus drops off children at school or the YMCA, the children in the front should get off the bus first. No shoving or pushing or sitting halfway in the isle. Children should be quiet when stopping at the Railroad tracks. No eating on the bus. Bullying will not be tolerated.

I have read and understand the expectations for transportation to and from school on the YMCA bus. This service is a privilege and may be revoked if the student(s) can not abide by the rules outlined above.

Parent Signature

Date



Description of Center Services

The Blair Family YMCA licensed programs strive to give all kids the opportunity to discover who they are and what they can achieve. We offer a variety of enrichment activities that help each participant learn, grow, and thrive. Youth participate in small, age-appropriate groups where they build self-esteem and learn new skills. Our experiences are built on the Y's core values of caring, honesty, respect, and responsibility.

The program includes daily components of: Indoor play, outdoor playgroup play, reading/book exploration, language and social development by talking and interacting with children and modeling appropriate language and behavior.

Day/Hours of Operation:

Monday-Friday 6:00am to 6:00pm

Ages of Children Served:

5-13 year olds

Location Information

Blair Family YMCA

1278 Wilbur St.

Blair, NE 68008

402.533.9622

Program Director: Kindra Barbre

Executive Director/CEO: Brandon Palmer

The Program Director is your primary contact for all information or any questions you have. We strongly encourage and invite parental participation and communication. Parents are invited and encouraged to visit the program anytime during the hours of operation, unless parental contact is prohibited by a court order. If you have any questions concerns or grievances that you feel have not been addressed by the Program Director, please contact the Executive Director. Licensed Regulations can be obtained by visiting the DHHS website.dhhs.ne.gov

Child Development Program

Our Child Development Program includes the following activities:

- Indoor activities which include arts and crafts, gym time, group games, free play, and swimming
- Outdoor activities which include swimming, playing on the playground, team sports and individual sports, and going on field trips
- Opportunities for your child to enjoy activities as an individual and in a group setting
- Opportunities for children to read and explore books through book club
- Opportunities for children to make new friends by enjoying different games and activities
- Fostering language and social development by talking and interacting with children and modeling appropriate language and behavior.

Parents Expectations

- Parents are expected to be involved in the quality experience:
- Complete needed paperwork and provide up to date immunization records
- Share concerns or comments with program leadership
- Communicate any changes in health, behavior or other areas that might impact the children

Blair Family YMCA Childcare Disaster Preparedness Plan

In the event of a Fire

All staff members will, as quickly as possible, gather their group of children and exit through the closest door. The staff will make sure they have their emergency procedures book which also includes all emergency information for each child in the program. They will meet in the field across from the facility. Once everyone is accounted for the director will call each child's parent informing them of the situation. We will have a specific plan written for each special needs child in order to accommodate them the best way possible in an emergency situation.

In the Event of a Tornado

When the sirens are heard, the director will inform the staff of the situation. Staff will line their children up and take them into the women's locker room where they will wait out the storm. We will have a specific plan written for each special needs child in order to accommodate them the best way possible in an emergency situation.

In the Event of a Flood

All staff members will, as quickly as possible, gather their group of children and exit through the closest safest route out of the building. The staff will walk their group to the field across from the facility. The staff will have their emergency procedures book which also includes all emergency information for each child in the program. The director will contact all parents informing them of the situation. If it is not safe the director will inform the parents of the situation and will let them know they will receive a second phone call when it is safe enough to pick up their child. We will have a specific plan written for each special needs child in order to accommodate them the best way possible in an emergency situation.

In the Event of a Natural or Man-Made Disaster

All staff will, as quickly as possible, gather their group of children and exit the building through the safest route out of the building. Depending on the situation they will go to the field across from the facility. The staff will have their emergency procedures book which also includes all emergency information on each child in the program. When all children are safe, if possible, all parents will be notified of the situation. They will be told when and where they can pick up their child. If it is not possible authorities will be notified and parents will be able to contact them. We will have a specific plan written for each special needs child in order to accommodate them the best way possible in an emergency situation.

Exclusion of Ill Children

Children who are ill may not return until they are symptom free for 24 hours. They must also be fever free for 24 hours, without the use of fever reducers. If your child becomes ill during program hours, you will be notified and requested to pick up your child immediately. Our staff will administer first aid for minor injuries. You will be notified if your child needs prompt medical care.

Please keep your child at home if you notice that he/she begins to show signs of Covid-19. Please let the YMCA know as soon as possible if your child has tested positive for Covid-19. Children who test positive for Covid-19 will not be allowed to return to the program until it has been 10-14 days since testing positive and the child is symptom free.

Fees

Fees must be paid by signing up for automatic draft. If you sign up for auto draft that payment will be taken out the Monday after your child attends camp.

Attendance and Pick Up

Only people authorized by the parent may pick up your child from the program. I.D. will be requested from anyone new or unknown picking up your child. In an emergency situation parents may notify the Program Director that someone other than an authorized person will be picking up their child. Children must be picked up from the program on time, or late charges will apply.

Termination of Care

We will make every attempt to work with children and teach appropriate behavior however we will suspend or terminate children as a last resort. We have the right to suspend or expel children from our program if they or their families threaten safety or interfere with the sustainability of a quality program.

Personnel Policies

Staffing is key to a high-quality child care program. Each staff member goes through an extensive hiring process including a criminal history background check, reference checks, and interviews. We follow the DHHS staff qualification and training guidelines. Staff will receive annual training relating to children, health and safety skills and are First Aid and CPR certified.

Staff discipline procedures are outlined in the Employee Handbook/Child Care Center Standards.

I have received a copy of the Center's Description of Services and Policies for Blair Family YMCA Childcare. Please sign and return to the Child Care Director.

Signature

Date

I acknowledge that I have received the Parent Handbook in its entirety.

I acknowledge that I have read the entire School Age Care Parent Handbook.

I acknowledge that it is my responsibility to comply with the policies contained in the handbook.

I acknowledge that there is a \$25 NSF fee for returned payments.

I acknowledge that I should consult The Center / Program Director regarding any questions that I have regarding policies and/or issues not covered in the handbook.

I acknowledge that this handbook is not a contract of service. I acknowledge that I have entered into my child care relationship with the YMCA voluntarily and acknowledge that there is no guaranteed specified length of child care.

Accordingly, either I or the YMCA can terminate the relationship at will, with or without cause, at any time so long as there is no violation of applicable federal or state law.

I acknowledge that revisions to the handbook may occur without prior notice to Parents. All such changes will be communicated to me. I understand that revised information will supersede existing policies.

I also acknowledge that the YMCA Parent Handbook is available to me.

Parent / Guardian Printed Name

Center Director Printed Name

Parent / Guardian Signature

Center Director Signature

Date

Date

****THIS ORIGINAL FORM IS TO BE PLACED IN CHILD'S FILE - OFFICE COPY****