

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

LEARN THROUGH PLAY

YMCA PRESCHOOL

YMCA IN EAGAN

SEPTEMBER 2017 – MAY 2018

THE Y DIFFERENCE

Children are everyone's future and your Y lives to (and loves to) invest in them. Y Preschool fills your child's day with opportunities to explore the wonders of their world, giving them experiences that help them grow and develop into confident, caring, happy individuals. Y Preschool develops physical, emotional and social competencies, providing more learning opportunities for your child than any other preschool program.

OUR CURRICULUM AGE-APPROPRIATE EXPERIENCES

The Y uses The Creative Curriculum® for Preschool as the foundation for creating the best preschool programs for children. The result is a comprehensive curriculum with a clear organizational structure and a particular focus on routines and learning experiences. Our developmentally appropriate preschool programs foster joyful and purposeful learning while they address specific needs. Children develop skills for classroom readiness and a passion for learning.

DISTINCTIVE & NURTURING

The Eagan Y Preschool program offers a distinctive learning experience in a fun, nurturing environment. Qualified preschool teachers assist children in the development of classroom socialization, create a passion for learning and prepare them for school success. Amenities such as the swimming pool, Kid's Gym and state-of-the-art classrooms provide additional enrichment experiences. Amenities vary by location.

Y PRESCHOOL LOCATION: YMCA IN EAGAN

550 Opperman Drive Eagan, MN 55123 **P:** 651•259•6167



Y PRESCHOOL AGES 3*,4, 5 YEARS

The YMCA recognizes that children learn in different ways. Our part day and extended day format strengthens learning with additional enrichment activities to round out the academic curriculum.

Days: Monday - Friday

Hours: 9:30 a.m. – 2:30 p.m. **Fee:** \$638/mo.

Days: Monday/Wednesday/Friday

Hours: 9:30 a.m. – 2:30 p.m. **Fee:** \$363/mo.

Days: Tuesday/Thursday

Hours: 9:30 a.m. – 2:30 p.m. **Fee:** \$275/mo.

Add Extended Care Options:

9:00 - 9:25 a.m. **Fee:** Additional** 2:35 - 3:30 p.m. **Fee:** Additional**

- * Children must turn 3 by September 1, 2017 and be potty trained.
- ** Contact program Site Director for more information.

 $\label{lem:membership} \mbox{Membership is not required for Y Preschool registration.}$

Financial assistance is available.

Program Fee includes snack and lunch.

ymcamn.org

YMCA PRESCHOOL

YMCA IN EAGAN
SEPTEMBER 2017 – MAY 2018

ENRICHMENT & PROGRAM HIGHLIGHTS

To enhance each child's learning experience, the YMCA in EAGAN Preschool includes these Enrichment Programs at no additional cost.

SPLASH

Children are introduced to a safe aquatic environment where fun games help them to become comfortable in and around water.

KIDZ FIT

Kids stay fit through play and build the foundation of healthy habits while having fun. Children learn about the importance of taking care of their bodies, exercise and movement. Activities include kids yoga.

MUSIC & MOVEMENT

Through music and dance kids explore musical concepts in many ways including singing, dancing, rhythm activities, finger play and through musical instruments. These activities help to connect music and movement and develop large and small motor skills while kids focus on listening and self-expression.

LANGUAGE

Explore languages like Spanish or Sign Language through games, storytelling, songs and other activities.

LITTLE LOTUS YOGA

Gives kids a way to explore movement and stretching while building self esteem. This is done through age appropriate imagination play.





YMCA PRESCHOOL

CORE CONTENT AREAS

Literacy – increased vocabulary and language skills, comprehension and enjoyment

Mathematics – beginning understanding of numbers concepts, patterns and relationships

Science – beginning understanding of physical, life and environmental sciences

Social Studies – understanding of people, places and environments

Arts – knowledge and understanding of dance, music, drama and visual arts

Technology – awareness and beginning basics of tools and technology

Health Habits – understanding of healthy eating, physical and personal safety and building life long enjoyment of physical activities

Body, Mind and Spirit – developing social skills, core values and a foundation for social responsibility

FOR MORE INFORMATION CONTACT: YMCA IN EAGAN

550 Opperman Drive Eagan, MN 55123 **P:** 651•456•9622

THE YMCA FAMILY NETWORK

When you're connected to the Y's Preschool, you're connected to something much larger. A network devoted to children and families exists within your Y's community branch and extends throughout the city, state and country. This network, over 144 years strong, is committed to developing the total person – spirit, mind and body – through nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility.

At the Y, strengthening community is our cause. Every day, we work side-by-side with our neighbors to make sure that everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive. From child care to youth programs to extraordinary camping opportunities, a healthy beginning at a Y Preschool can be the start of a healthy lifestyle throughout childhood and adulthood.

PARENT COMMUNICATION

Daily and weekly communications keeps parents abreast of their child's progress. Each child creates their own portfolio with work samples to be reviewed twice a year at parent conferences. Preschool locations incorporate the local school districts Kindergarten readiness measures into the assessments. We create a partnership for your child's success.

NATIONALLY ACCREDITED

YMCA Preschool is nationally accreditted by the National Association for the Education of Young Children. Only 10% of all programs nationwide have achieved NAEYC accredition.

HOW TO REGISTER

- Fill out this enrollment form completely. Ages must be as of September 1, 2017.
- 2. Enclose registration fee: A \$50 per child registration fee must accompany your registration form before any child can be considered enrolled or be placed on the waiting list. Registration fee is non-refundable.
- 3. Return registration form by mail or fax to:

YMCA CUSTOMER SERVICE CENTER 2125 East Hennepin Ave., Minneapolis, MN 55413 Phone: 612-230-9622 Fax: 612-223-6322

- 4. The first month's tuition is due Tuesday, June 6, 2017. If your tuition is not received, your spot will be forfeited to those on the waiting list. During the school year, tuition must be paid by Monday, one week prior to the start of each month.
- 5. Confirmation will be mailed upon completed registration.
- 6. Childcare immunization records, emergency card information and health care summary are due on Monday, one week prior to the start of the program. The child will not be allowed to attend unless we have these health forms. This is a state law. The state requires and checks that a physician has signed the health form.







Non-profit Organization U.S. Postage Paid YMCA Twin Cities, MN

YMCA PRESCHOOL

YMCA IN EAGAN



ymcamn.org





YMCA PRESCHOOL REGISTRATION

YMCA IN EAGAN SEPTEMBER 2017 – MAY 2018

Please use one form per child and print neatly. Return this completed form to

YMCA Customer Service Center • 2125 East Hennepin Avenue • Minneapolis, MN 55413 • P 612 230 9622 • F 612 223 6322

| PARTICIPANT INF | FORMATION: Use | full legal names | for all parties. | | | | | |
|-------------------------------------|--|-----------------------------|----------------------------|---------------------------------------|--|-------------------|---------------------------------|-----------------|
| Child's name (plea | ase print) | | | | | | ☐ Female | ☐ Male |
| Home phone (| _) | | | | | | | |
| Address | | | | City | | State | eZip_ | |
| Birthdate/_ | / | | | | | | | |
| Race/Ethnic Backgrou | ınd (opt.): 🗌 Black or | African American |] White ☐ Hispan | ic or Latino | American Indian/Alaskar | n Native 🔲 Asia | an or other Pa | cific Islander |
| Other | | | | | | | | |
| PARENT, GUARDI | IAN OR PERSON | RESPONSIBLE FO | OR CHILD: | | | | | |
| Parent/Guardian* | : | | Birt | hdate/ | / Preferred E- | mail | | |
| Work phone (| _) | Home phone () Cell phone () | | | | | | |
| Parent/Guardian* | : | Birthdate/ Preferred E-mail | | | | | | |
| Work phone (| _) | Home p | hone () | | Cell pho | ne () | | |
| Child resides with | n 🗌 Mother | ☐ Father ☐ | Both Ot | her | | | | |
| * Parent's/Guardi | an's address if di | fferent from child | d's | | | | | |
| | | | | | | | | |
| PRESCHOO | L CLASSES | | | | | Start Date | * | \ |
| Ages 3 – 5 Years | s as of September | 1,2017 | | | | | | |
| PROGRAM: | | | FEE | DAYS | | | ded Care O | . |
| Preschool | 1st Choice | 2nd Choice | \$638/month | M – F | 9:30 a.m 2:30 p.m. | Drop Off: | 9:00 a.m. – 9 | |
| ☐ Preschool | 1st Choice | 2nd Choice | \$363/month \$275/month | M/W/F T/TH | 9:30 a.m 2:30 p.m. | Pick Up: | 2:35 p.m. – 3 ee. See progra | |
| | 1st Choice | 2nd Choice | \$275/IIIOIILII | 1/111 | 9:30 a.m 2:30 p.m. | | more informat | |
| *Fee includes sn | ack and lunch. | | | | | | | |
| The first month | h's tuition is du | e Tuesday, Jun | e 6, 2017 and | is non-re | efundable after July | 7, 2017. | | |
| "Authorization of Se | rvice" must be on file | e before fees may be | billed to County/Th | nird Party/A | | | rice" is receive | ed. A current |
| | | | | | Other Name: | | | |
| . , | Agency/County Worker's Name Phone Number Phone Number Paperwork submitted to County/Agency: Agency/County Worker's Name Paperwork submitted to County/Agency: Agency/County Worker's Name Phone Number Paperwork submitted to County/Agency: Agency/County Worker's Name Phone Number | | | | | | | |
| | | | | | ose payment option below. |) | | |
| DEPOSIT ONLY: \$50 One-time | e non-refundable regi | stration fee. | MON ☐ \$ | ITHLY EFT AI | JTHORIZATION: non-refundable registration | n fee and month | ly fees progra | ım. |
| Check #: | | Amount: \$ | | | | | | |
| | | | | Nar | me on Card | | | |
| I agree to pay above to Signature X | - | 5 | | are not on | file. | | | |
| | | | | | orize the YMCA staff to give r | ny child rooses-b | olo first aid s | raoney services |
| as needed, provided the | | | | Livity, i autilo | onze the fMCA stail to give i | ny chila reasonac | ne first ald eme | rgency services |
| I understand by signing | g this form that my chil | d will be enrolled for th | he entire school year | or the balanc | e of the year. If a parent choo | ses to withdraw | a child from th | e program we |
| require a two week wri | tten notice and two we | ek advance tuition pay | yment. Classes must r | neet a minimu | um enrollment number to run. | Registration fe | e is non-refur | ndable. |
| Parent or Guardian Sign | nature: X | | | · · · · · · · · · · · · · · · · · · · | Date: | | | |

THIS FORM MUST BE COMPLETED TO REGISTER

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT EFFECTIVE 8/01/13

In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the YMCA of the Greater Twin Cities (hereinafter referred to as YMCA) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

- 1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment. without ieopardizing the essential qualities of the activity.
- 2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct or conduct that con-

- stitutes greater than ordinary negligence. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs
- 4. I represent that I have adequate insurance to cover any injury or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
- In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
- I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

PARENT/GUARDIAN AUTHORIZATION SECTION -- TRANSPORTATION/MEDICAL

- 1. In the event that I/my child need immediate medical attention for injuries received while participating in a YMCA program, I authorize the YMCA staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed.
- 2. I give permission for myself and/or my child to be transported by the YMCA as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in walking field trips.
- 3. I also give permission for myself or my child to enter Canada with the YMCA. I also understand that I/my child will need to bring our passport to camp if the trip involves
- 4. I hereby acknowledge that the YMCA will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise.
- 5. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. The YMCA receives medical information on campers/participants that may need to be shared with medical providers.
- 6. If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If YMCA staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge the YMCA and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.

GENERAL

- 1. I hereby release all pictures of myself or my child taken by the YMCA for promotional purposes and programming materials including the YMCA website.
- 2. I give my permission for the YMCA to administer sunscreen as needed and to change my child's diaper while my child is in their care.
- 3. I acknowledge that certain sections of this waiver may not apply to me and/or my child and the programs or activities that we have chosen but agree to be bound by any applicable language.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if the YMCA did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

| Signature | Print Name | | | | |
|---------------------|---|-------|------|--|--|
| Address | City | State | Zip | | |
| Telephone () | Date | | | | |
| | PARENT OR GUARDIAN ADDITION (Must be completed for participants u | | | | |
| In consideration of | (PRINT minor's names) being permitt om any claims alleging negligence which are brough | | | | |
| Parent or Guardian | Print Name | | Date | | |