

# TRY TO CONTAIN YOUR EXCITEMENT



## CANAL FULTON Y FUN DAYS 2015

PROGRAM HELD AT NORTHWEST PRIMARY

Kids entering Kindergarten - 5th grade

June 2 - August 13 (No program week of June 29)

Tuesdays and Thursdays 9:00am - 2:00pm

### CANAL FULTON YMCA

(offices located at)

7389 Caritas Circle NW, Massillon, Ohio 44646

P 330-830-6275, F 330-837-9287

#### Additional Information:

Program run by Canal Fulton YMCA Staff

Pack a lunch and water bottle daily

Program will provide a pm snack

At the Canal Fulton YMCA Y Fun Days summer program, kids have the opportunity to make friends, have fun, get active and discover who they are and what they can achieve.

Our staff incorporate the Character Values of Trustworthiness, Respect, Responsibility, Fairness, Caring and Citizenship as well as empower children to make lasting social changes.

WEEK	DATES	THEMES	Regional Y Member	Non-Member
#1	June 2 & 4	Arts & Crafts	\$24	\$28
#2	June 9 & 11	Science	\$24	\$28
#3	June 16 & 18	Golf	\$24	\$28
#4	June 23 & 25	Clowning & Magic	\$24	\$28
#5	July 7 & 9	Performing Arts	\$24	\$28
#6	July 14 & 16	Builders & Inventors	\$24	\$28
#7	July 21 & 23	Sports	\$24	\$28
#8	July 28 & 30	**Water Field trip to David YMCA	\$26	\$30
#9	August 4 & 6	Music	\$24	\$28
#10	August 11 & 13	Nature	\$24	\$28
		TOTAL DUE		

#### Contact:

Lyndsay Gatto, David Y  
Childcare Director  
lgatto@ymcastark.org

- Please Circle Weekly rate for weeks attending
- Please add up your total due

#### Registration:

Complete both sides & submit with payment to the David Y

[ymcastark.org](http://ymcastark.org)

# 2015 Canal Fulton Y Fun Days Registration form

Child's Name \_\_\_\_\_ Child's Age \_\_\_\_\_ Birth date \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Child's Grade August 2015 \_\_\_\_\_ School \_\_\_\_\_ Phone # \_\_\_\_\_ Gender M F  
Mother's Name \_\_\_\_\_ B-day \_\_\_\_\_ Father's Name \_\_\_\_\_ B-day \_\_\_\_\_  
E-mail address to receive Y Fun Days program updates: \_\_\_\_\_  
Please list special information; allergies, custody issues, behavioral concerns, etc. (we cannot administer medication):

## Please initial the week(s) your child is attending

<input type="checkbox"/> June 2 & 4: Arts and Crafts Week	<input type="checkbox"/> July 14 & 16: Builders and Inventors
<input type="checkbox"/> June 9 & 11: Science Week	<input type="checkbox"/> July 21 & 23: Sports Week
<input type="checkbox"/> June 16 & 18: Golf Week	<input type="checkbox"/> July 28 & 30: Water Week
<input type="checkbox"/> June 23 & 25: Clowning and Magic	<input type="checkbox"/> August 4 & 6: Music Week
<input type="checkbox"/> July 7 & 9: Performing Arts Week	<input type="checkbox"/> August 11 & 13: Nature Week

I, \_\_\_\_\_ (parents name) grant permission to the Canal Fulton YMCA for my child to be transported by Peterman busing on **July 30** to and from the Paul and Carol David YMCA for a swimming field trip.

## Swimming Permission

Y N (please circle) I give permission for my child to swim @ the David YMCA on July 30th  
(Please circle swimming ability) Non-swimmer beginner swimmer advanced

## Permission To Publish Minor Photography

Y N (please circle) I give permission for my child to be included in publicity pictures connected with the program.

## Walking Trip Permission

I, the undersigned parent/guardian, do hereby grant permission for my child to walk outside of Northwest Primary with staff for the occasional walking trip associated with Y Fun Days.

## Release of all Claims

Waiver of liability: I hereby accept all responsibility for, and assume the risk of, any injury or damage to my person or dependent children which might arise directly or indirectly as a result, and or participation, in a YMCA program. I hereby expressly release, discharge and hold harmless from any liability whatsoever the YMCA, the various branches and subdivisions thereof, and all employees and volunteers in their capacities as representatives of the YMCA, expressly including, but not limited to, the Board of Trustees of the YMCA, except for injuries caused intentionally, or by willful misconduct. I certify that I am familiar with the contents of this release, that I have read and understand the same, and that it is my intention by signing this release that the same be binding not only on me, but my heirs, administrators, executors, successors, and assigns.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**(Include yourself)** Please list the persons permitted to pick-up your child and/or contact in case of emergency.

<u>Name</u>	<u>Relationship</u>	<u>Home #</u>	<u>Cell#</u>
1. _____			
2. _____			
3. _____			
4. _____			

Registrations can be mailed to:

(Please make checks payable to the Canal Fulton YMCA)  
Paul and Carol David YMCA, Attention Lyndsay Gatto  
7389 Caritas Circle NW, Massillon Ohio 44646