Greater Lowell Family YMCA Drop-In Center
Registration and Rules Contract

Name:_____ Date of Birth: _____/_____/_____
Address:_____
Street City State Zip
Sex:_____ Home Phone: ( )_____
School:_____ Grade:_____
Medical Insurance Company:_____
Medical Insurance Policy Number:_____
In case of an emergency, please contact:
Name:_____ Relationship:_____
Address:_____
Phone number: ( )_____
Any medical conditions we should know about? _____

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*IMPORTANT Youth Drop-In Center Rules *IMPORTANT

1) I will not arrive at the Drop-In Center before **6:15** and I will leave at 8:30, unless the program is running late, or there are changes in the program. I will stay with the staff the entire time.
2) I will demonstrate the YMCA core values of caring, honesty, respect and responsibility to everyone at Drop-In at all times
3) I will not vandalize or steal from the Drop-In Center
4) I will not fight or argue with other people (verbal or physical)
5) If told to leave Drop-In, I will leave the property immediately
6) I will only go in places where I am allowed
7) If the program has been cancelled, I will not be allowed on the Drop-In Center's property
8) It is my responsibility to know the schedule of Drop-In and whether or not it is cancelled
9) All children with their hair longer than their shoulders MUST wear a bathing cap in the pool
10) The YMCA is *not* responsible for lost or stolen items. Children are encouraged to bring locks.
11) Parents are encouraged to sign their children into the Drop-In Center. **THE YMCA IS NOT RESPONSIBLE IF PARENTS DO NOT SIGN THEIR CHILDREN INTO DROP-IN.**
12) If I break these rules I will not be allowed to attend any Drop-In Center Program

I authorize the Drop-In Center's staff to order emergency treatment and care for my child in the event that I cannot be reached. I agree to waive and release any and all claims I may have arising from this program, including injuries to my child or property damage against the Greater Lowell Family YMCA Youth Drop-In Center, their agents, attorneys, or employees in which claims arise from use of the Drop-In Center facilities. I grant permission to the Greater Lowell Family YMCA to photograph my child for use in the Drop-In Center's promotional materials.

_____ _____/_____/_____
Signature of Child Date

_____ _____/_____/_____
Signature of Parent/Guardian Date