



articipant Name					
	ble for Payment:		f Birth	_/	_/
ayment Plan Ch	oice: Weekly on the Friday before the v	veek of service			
<ul> <li>Weekly d</li> <li>Semi-Mo falls in th</li> <li>You are r</li> <li>A \$1 per the fee is</li> <li>All fees f</li> <li>To termin</li> </ul>	<b>icy and Draft Agreement</b> Irafts payments will be processed on the Fridanthly and Monthly drafts will be processed on that date range. The sponsible for the entire amount for which you <b>minute</b> charge will be added when you are sposted. The provide the spost of the spotter of	the dates chosen and will cover ou are enrolled, even if your ch late picking up your child and wil t in order to enroll. e Request Form or submit in writ	all weeks whe <b>ild does not</b> a Il be drafted a ting at the YMC	ere Monc attend. Iccording	ly after
• Initial	ALL PROGRAMS Bank or credit card draft is a CONTINUC program concludes. I understand there a monthly statements and report any that I will not receive a statement or bill draft option I choose; my childcare of	are NO refunds given. <b>It is my r</b> corrections within 30 days to ing for my child care from the YN	esponsibility the YMCA. I 4CA and depe	to cheo also uno anding o	<b>ck my</b> derstand <b>on the</b>
• Initial	It is my complete understanding that if I wish to cancel my child care and withdraw from the program, <b>I MUST complete the CHANGE REQUEST FORM or submit in writing at least 5 business DAYS</b> before my draft date. If I wish to change my child care in any way (including changes in my draft information), I <b>MUST complete the CHANGE REQUEST FORM and it may take up to 10 DAYS</b> for the change to take effect (forms available at the Member Services Desk).				
• Initial	Should my child care draft not be honored for <b>ANY REASON</b> , I realize that I am still responsible for that payment plus a <b>\$30 service charge</b> applied by the YMCA. This is in addition to any service fee I may be charged by my financial institution. If the draft does not go through for a billing cycle, my child care may be subject to termination. Once my past due balance is paid, my child care and draft will be reactivated.				
• Initial	<b>CAMP ONLY</b> I understand that my child is registered for weeks of camp. I understand that I am responsible for payments for all sessions for which my child is registered, regardless if they attend or not.				
Signature		Date			
FOR OFFICE US	EONLY				
o Payment Option		Program Enrolled			
Weekly		Fees:			
		Current Fees Due	\$		
1 <sup>st</sup> Draft Date//		Registration Fee	\$		
<ul> <li>Checking o Savings o Visa o MasterCard</li> </ul>		Total Due	\$		
Last 4 digits on account		Notes			
Staff Signature					