



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# ACHIEVEMENT CONTINUES WITH THE YMCA

## Before and After School Program OWASSO FAMILY YMCA

YMCA GO Club is a before- and after-school program that offers kids the opportunity to participate in non-competitive physical activity, nutrition education, literacy, STEM, and Arts education. The YMCA GO Club provides solutions for reversing childhood obesity trends, curbing risky behaviors and anti-social behaviors, improving academic performance and keeping kids in school.

Available on-site Bailey and Stone Canyon elementary schools. GO students from other schools are transported to the Y via Owasso Public Schools.

- GO Club operates August 17, 2017 - May 24, 2018
- Scholarships and DHS accepted
- Monday-Friday 6:30 - 8:00 a.m. and 3:35-6:00 p.m.
- Before and After Care: \$306/members per month, \$351/non-members per month
- After Care only:\$248/members per month, \$295/non-members per month
- Before Care only: \$158/members per month, \$203/non-members per month
- \$50 annual registration fee for GO Club

Contact: Caity King 918.272.9622, [cking@ymcatulsa.org](mailto:cking@ymcatulsa.org)



# 2017-18 Owasso Family YMCA GO Club

## Registration Form

Please PRINT LEGIBLY & complete one form per camper.

Camper's Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Male  Female Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Grade \_\_\_\_\_ School Currently Attending \_\_\_\_\_

How did you hear about Owasso YMCA Go Club? \_\_\_\_\_

Number of Previous Years at OWASSOYMCA Go club \_\_\_\_\_

**Primary Contact:**  Mother  Father  Either  Other \_\_\_\_\_

Mother's Full Name \_\_\_\_\_

Work Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_

E-mail \_\_\_\_\_

Mother's place of employment \_\_\_\_\_

Father's Full Name \_\_\_\_\_

Work Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_

E-mail \_\_\_\_\_

Father's place of employment \_\_\_\_\_

### Child Release Authorization / Emergency Contact

Persons authorized to pick up child from the camp and contact in case of an emergency:

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Driver's License # \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Driver's License # \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

(Note: Each camper must have a current shot record on file from within the last year.)

Please list any SPECIAL CONSIDERATIONS relevant to your child such as medications, previous illness, injuries in the past 12 months, activity restrictions, developmental age, allergies, chronic health concerns, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed YMCA activities, except as noted by the examining physician and me. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the YMCA staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named above. I give permission for YMCA staff to render first aid and apply sunscreen. I give permission for my child to be transported in YMCA vehicles by certified YMCA drivers.

I hereby request that my child be accepted to attend the YMCA Of Greater Tulsa Go Club. I understand and am aware that my child will be participating in many physical activities and the potential for accidents does exist. In consideration of acceptance to GO Club:

I understand that the YMCA of Greater Tulsa will not be responsible for any lost or stolen items while members and/or program participants are using YMCA facilities, on YMCA premises, or on off-site YMCA program locations. I, the undersigned, for myself and my heirs, do hereby indemnify and hold harmless the YMCA of Greater Tulsa and its employees and agents from any and all claims for injury, illness, loss, or damage I, or my child, may suffer as a result of participation, including any injury caused by the negligence, if any, of the YMCA, its officers, employees, agents, volunteers, or the negligence of anyone else. I give my permission to the YMCA of Greater Tulsa to use, for no compensation, photographs, film footage, or tape recordings, which may include my or my child's image or voice for purposes of promoting or interpreting YMCA programs.

The YMCA of Greater Tulsa is founded on Christian principles and prohibits inappropriate behavior and conduct. This includes, but is not limited to, profanity or abusive language, inappropriate attire, smoking, use of alcohol or drugs, the removal of YMCA property, physical harm to another person or threat of such actions, sexually offensive actions, confirmed listing as a registered sex offender, or criminal conduct of any type. Such inappropriate behavior or conduct is unacceptable and will not be tolerated. When the safety of others is threatened a member or anyone on YMCA property may be immediately removed and expelled from all YMCA of Greater Tulsa facilities.

### PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

DATE

### Payment Method

Check (Make payable to YMCA)

VISA  Mastercard  AMEX

Account Number \_\_\_\_\_ Exp Date (mo/yr) \_\_\_\_\_/\_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Authorization to charge card on scheduled due dates.

Before Care Only : \$ \_\_\_\_\_

After Care Only : \$ \_\_\_\_\_

Before and After Care : \$ \_\_\_\_\_

Registration Fee \$50: \$ \_\_\_\_\_

Tax Deductible Campership Donation: \$ \_\_\_\_\_

**Total \$ \_\_\_\_\_**

Application and payment returned to:

8300 N. Owasso Expressway

Owasso, OK 74055

918-272-9622

**MISSION:** To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.