



# **MetroWest YMCA April Break Kids Morning Out Create & Swim**

**Grades K-5 9:00-12:00 Tuesday, April 20 and Thursday, April 22  
\$64 Family Memberships / \$80 Youth Memberships / \$128 Non-Members**

## **Approximate Schedule (subject to change)**

- 8:45-9:00** Drop Off
- 9:00-9:45** Group Games/Ice Breakers
- 9:45-10:00** Snack provided by the YMCA
- 10:00-11:00** Craft Hour
- 11:00-12:15** Swimming
- 12:15-12:30** Pick Up – Grab N' Go lunch provided at pick up for each participant

We can only sign your child out to an adult listed on his/her/their registration form. Please make sure the adult brings a photo ID for sign out. If someone other than a person listed is planning to pick up your child, please reach out to Jen to inform them of this change.

## **What to Bring for a Morning at the Y:**

- **Bathing suit, towel and any swim accessories needed**
- **Change of clothes**
- **Wear clothes that can get dirty with paint and craft supplies**
- **Outside play attire**
- **Water bottle – While our water fountains are turned off, we are able to fill water bottles**
- **Extra face coverings**

**Any questions or concerns, please reach out to Jen Hyman at x281 or [jhyman@metrowestymca.org](mailto:jhyman@metrowestymca.org).**



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## MetroWest YMCA April Break Kids Morning Out

Grades K-5 9:00 AM – 12:00 PM

Monday, April 20<sup>th</sup> & Wednesday, April 22<sup>nd</sup>

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address/Town/State/Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

List any email addresses we should send communications to: \_\_\_\_\_

\_\_\_\_\_

Emergency Contacts – Name and phone number for each (must have I.D. to pick up your child)

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

The following people are authorized to pick up my child:

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

\*ANY ALLERGIES \_\_\_\_\_

\*Please contact Jen and Cody for additional documentation if medications need to be administered during our program.

**Mandatory YMCA Waiver** I understand that the MetroWest YMCA assumes no responsibility for injuries or illnesses which may sustain as a result of my physical condition or resulting from my participation in any athletic activities, sports programs, and the use of any equipment, exercise or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses which may result from participation in these activities. I hereby release and discharge the MetroWest YMCA, its agents, servants, and employees from any and all claims for injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities. I understand that the MetroWest YMCA is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities on YMCA premises. **I acknowledge the WAIVER set forth above.**

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_