

# FEBRUARY VACATION FUN CLUB



**\*\*Register for all 5 days and save \$20**

No school?!?

What is there to do??  
**ONEIDA FAMILY YMCA**

The Oneida YMCA provides a daily enrichment program from 6:30AM to 6:00PM on all school vacation and snow days for children Kindergarten through 12 years old from any school district! YMCA Vacation Fun Club is a safe and nurturing environment, state licensed, fun, and best of all—affordable! Activities include swimming, arts & crafts, physical fitness, healthy cooking, science, character development, outdoor play and more!

**Rates Per Day: Members \$40      Non-Members \$50**  
**2nd Child \$35                      2nd Child Non-Member \$45**

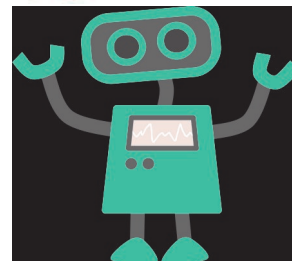
**Monday, February 19th— President’s Day**  
Science, history, crafts, and even a Presidential Election!

**Tuesday, February 20th— Making a Mess**  
Get messy with us as we make crazy putty, bubble art, and moon sand!

**Wednesday, February 21st— Getting Crafty**  
All kinds of arts & crafts!

**Thursday, February 22nd— Science Exploration**  
Science experiments, build your own robot and mystery box surprise!

**Friday, February 23rd— Pajama Party**  
Come relax! Enjoy a movie & popcorn!



**WHEN:** Register by Wednesday, February 14th to avoid a \$5 per day late fee  
**TIME:** 6:30AM—6:00PM  
**LOCATION:** ONEIDA FAMILY YMCA  
701 Seneca Street  
Oneida, NY 13421  
(315) 363-7788



For more information: Valarie Webb  
vwebb@ymcatrivalley.org



Registration Form

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_

Please Circle Applicable Rate:

Member \$40    2nd Child \$35    Non-Member \$50    2nd Child Non-Member \$45    Paid in Full Participant- No Cost/Included

Please check all days you are registering your child for. Fees are based on registration, regardless of attendance.

Mon, Feb. 19 \_\_\_\_\_ Tues, Feb. 20 \_\_\_\_\_ Wed, Feb. 21 \_\_\_\_\_ Thurs, Feb. 22 \_\_\_\_\_ Fri, Feb. 23 \_\_\_\_\_

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Yes, my child is registered with the Oneida Family YMCA School Age Child Care Program and I would like to use my child's emergency contact and allowable pick-up information on file.

Yes, my child is enrolled in Kindergarten or higher. All participants must be enrolled in at least Kindergarten to attend School Age Child Care Programming.

Home address

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/ Guardian Information

Parent \_\_\_\_\_ phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Parent \_\_\_\_\_ phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Child's Physician

Physician's Name \_\_\_\_\_ phone \_\_\_\_\_ Address \_\_\_\_\_

Preferred Hospital \_\_\_\_\_ phone \_\_\_\_\_ Address \_\_\_\_\_

Emergency contacts that may pick up your child

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Does your child have any conditions or concerns we should be aware of? Including allergies, illnesses, needed modifications or medications?

\_\_\_\_\_

I give consent for enrolment of my child(ren) in the Vacation week program held at the Oneida Family YMCA (YMCA of the Greater Tri-Valley) I also give consent for my child to participate in excursions or trips away from the facility. I will allow the YMCA to use my child in photographs or publicity for the YMCA. I understand that if my child is injured that a YMCA incident report must be filled out within 24 hours and Emergency medical care may be given in the event that I can not be reached.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

\*Please remember to bring photo ID when picking up your child.\*