

Spooktacular Spring Break

March 22-March 26

Spring Break at the YMCA of Southern Indiana.

Register Now!



*We build strong kids, strong families,
strong communities.*

Have a question about Spring Break?
Call Meredith Clipp-Rodriguez at 283-9622 or email
mclipp@ymcasi.org.
www.ymcasi.org

Clark County Branch
4812 Hamburg Pike
Jeffersonville, IN 47130
(812) 283-9622

Floyd County Branch
33 State Street
New Albany, IN 47150
(812) 283-9622



SPRING BREAK



Spring Break Camp—It's Spooktacular!

Full day childcare programs will be offered for children grades K-6 held at the YMCA of Southern Indiana.

Dates: March 22 - March 26

Hours: 6:30 a.m. - 6:00 p.m.

Registration: Pre-registration is until Wednesday, March 17. Registration is on a first come, first served basis and there are a limited number of spots.

Children will be divided into age groups and should register for appropriate group.

Children must bring a sack lunch, unless noted, and swim gear daily.

- Registrations are the responsibility of the parent/guardian.
- If you are not registered for the before and after school program, you must do so before registering for Spring Break camp.
- Mail registration or bring to the YMCA. **Be aware that spots fill up quickly.**

Fees:

If Registered before March 17

Week - Members:\$100 Non-members:\$115

Daily - Members:\$30 Non-members:\$35

If Registered after March 17

Week - Members:\$115 Non-members:\$130

Daily - Members:\$35 Non-members:\$40

- Additional child discount is \$15 per child.
- Anyone on financial assistance must call the YMCA for full time rate.
- A non-refundable down payment of \$20, subtracted from the full payment must be made to hold a spot.

Full payments must be made no later than March 30.

Monday, March 22: Friendly Ghosts!

Welcome to our family friendly Halloween Spring Break! Let's start by taking a dip in the pool with all the other ghosts and goblins. Next, we will have a haunting good time playing the Wii, then we will get in the spirit by making masks that aren't too scary.

Tuesday, March 23: Tricks!

After some more fun in the Spooktacular Aquatic Center we will make some crafty Trick or Treat bags that we can use later that afternoon at the Halloween Carnival! Everyone gets a prize, but keep your bags though, you will need them on Wednesday!

Wednesday, March 24: Treats!

Even though the leaves aren't falling yet, there is never a bad time to do a little Trick or Treating. We will do our version at the YMCA. Whether you dust off an old one or make a new one early, we will be watching to see who is best dressed in their costumes. But bring your swimming costume too!

Thursday, March 25: Eats!

All this haunting, tricking, begging, and treating. Let's go to Gattiland for the games and the eating. A few games of Graveyard Tag should help our appetites become pretty scary.

Friday, March 26: Monster Bash!

We've had a great week making March a great time for Halloween. Let's end it all with a big Monster Bash, complete with a bouncy, music, games, and maybe even a Guest Speaker. We will also swim one last time before all the tricks and treats are complete.



Spring Break Camp Registration Form

Select Dates Attending:

- March 22 March 23 March 24 March 25 March 26
 Clark County Branch Floyd County Branch

Child's Information:

Has any of your information changed within the last 2 years? Yes No

Name: _____

Address _____

City: _____

State: _____

Zip: _____

Phone: _____

YMCA Member: Yes No

Age Group: 5 or 6

7 or 8

9 and up

Male Female

Birthday: _____

School: _____

Hair Color: _____

Eye color: _____

T-shirt: 6-8

10-12

Adult S

Adult M

Adult L

Mother's Information:

Father's Information:

Name: _____

Name: _____

Day Phone: _____

Day Phone: _____

Evening Phone: _____

Evening Phone: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

List two additional adults permitted to pick-up child:

Name: _____

Name: _____

Day Phone: _____

Day Phone: _____

Emergency Contact's Information:

Name: _____

Email: _____

Day Phone: _____

Evening Phone: _____

Relationship to Child: _____

Signature of Parent or Legal Guardian: _____

Date: _____

Payment Draft (please select one):

I am authorizing a bank draft from my checking account and I have attached a voided check.

I have an account on file with School Age Childcare to be drafted

I am authorizing a credit card draft and I have provided all the information below:

Credit Card Type: Visa MasterCard Discover

Name as it appears on card _____

Card Number _____ Expiration Date _____

Billing Street Address _____ Billing Zip _____

Drafts will occur on Monday, March 29