

Payment Policy and Authorization

(Please note that this is a prepaid payment program. Payment for services, except for where otherwise noted is due in advance. Weekly fees are established on a school calendar year and do not vary regardless of program closures, school holidays, in service days, etc.)

Child's Name: _____ Program Location: _____

ENROLLMENT OPTION (Please select only one)

- Full Time** (Monday-Friday) – This plan provides care for children Monday through Friday and includes all minimum days, in-service days, and designated school holidays with no additional charge. There is no adjustment to absences or non-participation. Fee covers direct operating expenses (staffing, snacks, materials, activity fees etc.). When you enroll your child, you are reserving a space, time, staffing and provisions whether or not he/she attends. No refunds or credits will be given unless a CHANGE IN SCHEDULE form is submitted to the YMCA office 7 calendar days prior to the child's absence (i.e. family vacation). No fees will be charged for the weeks of Christmas break and spring break.)
- Part-Time** (up to 3 days per week) – This plan provides care for children for up to three days per week. There is no adjustment to absences or non-participation. Fee covers direct operating expenses (staffing, snacks, materials, activity fees etc.). When you enroll your child, you are reserving a space, time, staffing and provisions whether or not he/she attends. No refunds or credits will be given unless a CHANGE IN SCHEDULE form is submitted to the YMCA office 7 calendar days prior to the child's absence (i.e. family vacation). Children will be charged the DAILY RATE for any days that exceed the partial week plan. (No fees will be charged for the weeks of Christmas break and spring break.)
- Daily Drop In** – This plan is for families needing drop in care. This option is designed for families who will not attend on a regular basis. You will be charged each week following your child's attendance. This plan does not include any in-service or designated school holidays. Parents must sign up for school holidays or in-service days at least 7 calendar days in advance and if space is available.

Parent/Guardian Signature: _____

Date: _____

YMCA Staff Member: _____

Date: _____

PAYMENT OPTIONS

EZ Draft Payment Service

We are pleased to provide you with the EZ Draft payment service. This automatic draft service saves you time, postage and ensures that your payment is made on time. The Georgia Mountains YMCA will keep you advised of your billing information through monthly statements. Weekly statements are emailed to you if you provide us with an email address as well as monthly statements are available upon request and if you have a balance at the end of the month.

Enrolling in our "Automatic Processing through Draft" is easy. Just complete and sign the authorization form, attach a voided check and return to the YMCA office. After returning this form, your account will be active and all subsequent bill payments will be automatically deducted from your bank account weekly.

Advance Payment (Manual)

Manual monthly payments for all participants must be made by the LAST DAY of each month for the upcoming month. Fees become past due on the first business day of each month and must include a late fee of 15% of the balance due for that week. Any balance due may result in your child being removed from the program roster effective the following day. No further YMCA participation is allowed until the balance is paid in full. Payments can be mailed or dropped off at the J.A. Walters Family YMCA Office located at 2455 Howard Rd, Gainesville Georgia. Payments cannot be accepted at the program site.

GEORGIA MOUNTAINS YMCA

2455 Howard Rd. • Gainesville, GA 30501 • Phone: 770-297-9622 • Fax: 678-207-0167

Payment Type: _____ EZ Draft Payment Service (Voided check must be attached) _____ Advance Monthly Payment

I understand that I am in full control of my payments and I will notify you if at anytime I decide to make any changes, discontinue this service, or change or close my bank account.

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Signature: _____ Date: _____

PAYMENT POLICIES AND AUTHORIZATIONS

1. YMCA membership fee, registration fee, first week program fee and Emergency Kit are due at the time of registration.
2. Fees are based on a school calendar, weekly basis and do not vary regardless of in-service days, designated holidays or program closures.
3. As the enrolling parent, you are responsible for all fees related to your child's participation. This includes families that receive assistance through third party agencies such as co-pays or family fees.
4. The YMCA is unable to bill multiple parties for child care fees.
5. All payments will be drafted Friday prior to each week of your child's attendance. Fees will be collected by automatic bank draft of checking account. Parents have the option to pay manually and will be required to make payment by the last day of the month for the upcoming month.
6. No credits for days absent will be given for any family without written approval from the YMCA Branch Executive.
7. Any credits that have not been used within 60 days will no longer be valid. Parents are responsible for contacting the Member Services Department regarding their account.
8. The YMCA program requires 7 calendar days notice of any changes in your child's enrollment including changes in option, change in address, withdrawal from the program etc. Complete the CHANGE IN SCHEDULE FORM or WITHDRAWAL FORM and submit it to the YMCA office. There will be no changes made to any account unless this form has been completed and returned to the YMCA office 7 calendar days in advance. You will be responsible for payment in full if one week (7 calendar days) notice is not given as the YMCA has held my space.
9. Late payment fees will be assessed at 15% of the balance per week and charged to each account. If your account is submitted to collections there will be a 30% late fee added to the account.
10. Any payments returned for any reason will result in appropriate late fees, plus a YMCA service fee of \$30 per incident. All returned checks become the property of Northstar GT and will be collected to the full extent of the law.
11. Families who are unable to pay the full cost of participation are encouraged to apply for financial assistance through the YMCA Open Door Kid's Time Program made available through generous contributions from friends of the YMCA. Contact the YMCA for additional information and eligibility requirements.

I _____ hereby make assignment of all programming tuition to the Georgia Mountains YMCA, Inc. I also, make authorization for the same to release any personal information necessary to execute collection of payments due to the YMCA. I understand that I am personally responsible for all charges to my account, regardless of any reason unless approved and signed by the Professional Directors of the Georgia Mountains YMCA. I guarantee payment in full to Georgia Mountains YMCA, Inc. for all charges made for the care of my children. I understand that should my account be placed for collection, I will be responsible for all costs including, court cost, collection fees, and attorney fees.

Parent/Guardian Signature _____ YMCA Staff Date _____

SS Number _____ Driver's License _____