



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

At the beginning of each month, you will receive an invoice of what you owe for missed days of the program you are part of. On the invoice you will see the exact number of days your child(ren) attended my program whether it was part-time or full-time.

When your child(ren) do NOT attend my program, you **must** pay the difference based on what the state has set from your approval letter. For example: the amount for a part-time day is \$17.00 per day which means if your child(ren) miss 3 days out of the month my programs are available to you then you will owe \$51.00 since the state will not pay me for those days. Full-time days are \$33.00 per day which means if your child(ren) miss 3 days out of the month my programs are available then you will owe \$99.00. I cannot charge you anything higher than the amount that is set in place by the state.

I only allow **2 missed days** in the month with no charge **IF I HAVE BEEN NOTIFIED** that the child is sick or not attending the program. Anything missed after 2 days, you must pay. **NO EXCEPTIONS**. This also includes vacations. The only other exceptions to families not paying me for days missed are if the YMCA is closed due to power outages, no water, or if the school's cancel due to inclement weather.

If the state does not cover all the days in the month based on the report I receive and you need all the days covered, you need to provide copies of your paystubs for the month to show the state that you worked and needed care for the extra days, so you don't have to pay out of your pocket.

If payments are not made upon the due date, then your child(ren) will not be able to attend the Warren County YMCA After-School, School's Out Day Camp, or Camp Meskwaki Summer Day camp until payment has been made.

All payments will be automatically deducted from your account on the 15th of each month including parent co-pays if families have one. If you are not sure how much your parent co-payment is, please contact me and I will let you know. I have all approval letters from CCR&R for each family that applied and got accepted.

Please sign below that you have read this letter and understand the expectations of the State Pay Policy at the Warren County YMCA.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_