



Program Registration

MIDDLE

SCHOOL

INITIATIVE

For 6-8th graders



Date ___ / ___ / _____

PLEASE PRINT NEATLY

Student Name _____

Grade _____ Birth date ___/___/_____ School _____

Parent/Guardian Name _____

Address _____ Town _____

Home Phone _____ Cell Phone _____

Email Address _____

Text OK if cell phone? Yes No Emails go to cell phone? Yes No

Emergency Contact (Name & Phone #) _____

Session Enrolling (check one)

_____ Fall 1 (Sept 12-Oct 21)

_____ Fall 2 (Oct 24 - Dec 2)

_____ Winter 1 (Jan 2 - Feb 10)

_____ Winter 2 (Feb 13 - Mar 24)

_____ Spring 1 (Mar 27 - May 5)

Please list any special needs, concerns or medical information of which YMCA staff should know:

| | | | | | |
|---------------------|---------------|---------------------|---------------|-----------------------|---------------|
| For office use ONLY | ___/___ # ___ | Facility Tour | ___/___ _____ | Cybox Pre-Orientation | ___/___ _____ |
| Asset Survey | ___/___ _____ | Nutrition Survey | ___/___ _____ | Cybox Papers | ___/___ _____ |
| 4 Core Values | ___/___ _____ | Drug/Alcohol | ___/___ _____ | Relationships | ___/___ _____ |
| Bullying | ___/___ _____ | Water/Sports Safety | ___/___ _____ | Exercise/Wt Manage | ___/___ _____ |
| Other Programs | 1. _____ | | 2. _____ | | |

Letter of Agreement

MIDDLE



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Student Name



Offered at the DuBois Area YMCA, the Middle School Initiative is designed to inspire youth to discover their passions, to seek a healthy lifestyle and to gain the developmental assets needed to avoid risky behaviors as they pursue success in school and life.

A participant in the Middle School Initiative must agree to and complete the following objectives:

1. Complete a facility tour and preliminary equipment orientation
2. Take a pre & post developmental asset survey and nutritional assessment
3. Attend the following presentations **within** a 6-week session

| | | |
|----------------------|------------------------------|--------------------------|
| - YMCA 4 Core Values | - Drug & Alcohol Awareness | - Relationships |
| - Bullying | - Exercise/Weight Management | - Water or Sports Safety |
4. Attend a minimum of two other after school programs offered **during** the 6-week session enrolled in.
5. Record and verify by staff signature their attendance to sessions and programs on their MSI checklist

I, the **student** (print) _____, fully understand and agree to the above mentioned objective and policies in the Middle School Initiative Program Flyer set forth by the DuBois Area YMCA. If I fulfill the requirements within this agreement I will then receive a youth membership for an additional 46 weeks. If I fail to comply my youth membership and enrollment in the Middle School Initiative may be discontinued immediately.

I, the **parent/guardian** (print) _____, grant permission to my child to enroll in the Middle School Initiative program and will support my child's attendance and involvement. I also allow the DuBois Area YMCA to use my and/or my child's name, picture or voice for the purposes of advertising, publicity and sales promotion.

BOTH STUDENT AND PARENT SHOULD SIGN BELOW

Student Signature _____ Date _____

Parent Signature _____ Date _____

YMCA Staff Signature _____ Date _____