



**Boreal
ChildCare Program**
232 Northern Avenue
Sault Ste. Marie, ON
705.256.7558

Boreal ChildCare Program

FEE STRUCTURE

Program	Age	Rate
Infant	Birth - 18 months	\$47.00
Fullday Toddler	18 - 30 months	\$42.00
Fullday Preschool	30 months - 5 years	\$38.00
JK/SK Before & After School Program	4 - 5 years	\$20.00
JK/SK Before School OR After School	4 - 5 years	\$12.00
Before & After School Program	6 - 12 years	\$20.00
Before OR After School	6 - 12 years	\$12.00
Extended AM Hours All ages (6:30 - 7:30)		\$7.00
Extended PM Hours All ages (5:30 - 6:30)		\$7.00
Extended AM & PM All ages		\$10.00

- Fees are calculated based on the number of days per month your child is enrolled. There are no deductions provided for absences. **All absences must be paid in full.**
- Please be advised that children must be enrolled a minimum of two days per week. Changes require a two week notice. These days must be the same every week.
- ChildCare fees are paid by Pre-authorized Payments. Please provide either a void cheque or credit card information at the time of registration.
- The YMCA ChildCare offers reduced fees when enrolling two or more children.
- There is a 5% fee reduction in ChildCare fees for YMCA Family/Adult members. Please inform the ChildCare manager if you are a Family or Adult Member.
- The YMCA will initiate collection proceedings to collect unpaid accounts.
- If you are delayed beyond regularly scheduled program hours, a supplementary fee of \$5.00 for every fifteen minutes will be charged to your ChildCare account.

Contact:
Laura Njari
Supervisor of
Boreal ChildCare
705.256.7558
laura.njari@ssmymca.ca

Building healthy
communities

Boreal ChildCare Registration

Child's Name: _____ Date of Birth: _____

Address: _____ Postal Code: _____

Telephone No.: _____

Name of Mother (Guardian): _____

Address: _____ Telephone No.: _____

Place of Employment: _____ Telephone No.: _____

Name of Father (Guardian): _____

Address: _____ Telephone No.: _____

Place of Employment: _____ Telephone No.: _____

Please check which program you are applying for:
Infant Toddler (18-30 mos) Preschool (30 mos-5 yrs) JK/SK (4-5 years) School Age (6-12 years)
Before After Before After

I require extended hours AM PM BOTH Arrival Time _____ Departure Time _____

MONDAY _____ TUESDAY _____ WEDNESDAY _____ THURSDAY _____ FRIDAY _____

YMCA Family/Adult Member: Yes No Subsidy Requested: Yes No

Signature: _____ Date: _____ Email: _____

Payment

Please provide either a void cheque or credit card information at the time of registration.

Office Use Only:

Date of Submission: _____

Start Date: _____ Date of Discharge: _____