



**Riverview
ChildCare Program**
51 Wireless Avenue
Sault Ste. Marie, ON
705.945.8080



Riverview ChildCare Program

Fee Structure

	Daily Fee
Infant	\$45.35
Toddler	\$42.25
Preschool	\$40.00
Before School	\$10.05
After School	\$12.00
Before & After School	\$20.00

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.**

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 \$1.00 per minute will be charged to your ChildCare account.

Contact:
Allyson Pazdrak
Supervisor of
Riverview ChildCare
705.945.8080
allyson.pazdrak@ssmymca.ca

Building healthy
communities

Riverview 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) Before & After

Days of Care Required

Riverview YMCA provides a flexible program for families. We ask that if you require a flexible schedule, that you submit your schedule in writing by WEDNESDAY FOR THE FOLLOWING WEEK. If your schedule will remain consistent, please indicate your estimated drop off and pick up time below. Email: _____

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

I require flexible care Drop off time

My schedule will remain consistent Pick up Time

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

Signature: _____ Date: _____

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: _____