



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

SARATOGA REGIONAL YMCA'S BABYSITTING PARENT HANDBOOK

Battenkill Branch: 587-3110
Ages: 8 weeks-11 years

Monday-Friday
9:00 am-12:00 pm
4:00-7:30 pm

Saturday & Sunday
9:00 am - 12:00 pm

*Hours subject to change

Malta Branch: 583-9623
Ages: 8 weeks-11 years

Monday-Friday
9:00 am-12:00 pm
4:00-7:30 pm

Saturday
9:00 am-12:00pm

*Hours subject to change

Saratoga Springs Branch:
583-9622 *124
Ages: 8 weeks-11 years

Monday-Friday
8:15 am-2:00 pm
4:00-7:30 pm

Saturday & Sunday
8:15 am-12:30 pm

*Hours subject to change

Wilton Branch:
587-3000 *157

Monday-Friday
9:15 am-12:00 pm

Tuesday, Wednesday & Thursday
5:00-8:00 pm
Evening reservations only; reservations must be
made by 1:00 pm the day of service.

Saturday
9:00 am-12:00 pm
Saturday reservations must be made
by 5:00 pm the day before.

*Hours subject to change

Parent Handbook

The purpose of the Saratoga Regional YMCA's Babysitting Parent Handbook is to provide parents/guardians with information on our Babysitting services. This handbook does not in anyway, constitute a contract between the parent, guardian or other responsible persons and the YMCA relating to Babysitting services. The following information will ease your child's transition into the Babysitting Room.

Registration & Orientation

A Registration Form and Medical Authorization must be filled out for each child; the required forms are available at the Babysitting Room. To complete the form you will need the information from your child's immunization record including tetanus and medical insurance coverage information; prior to your child attending the program. We will review the completed forms, answer any questions you have and explain the reservation procedure. A copy of your child's immunization report must accompany his/her registration form. We do have religious exempt immunization forms available upon request.

Communication

Staff will communicate directly with the parents, reporting the activities in which your child engaged, any bumps, falls, or crying episodes and basic information about your child's interactions with others in the room. If an emergency arises, a child becomes ill or if your child is having difficulty adjusting while in the program, the staff will find the parent to return to Babysitting. After 20-25 minutes of inconsolable crying we will notify the parents.

Safety

A name label will be placed on your child when they enter Babysitting and should be removed as they leave the room. Also, for additional security reasons, parents will receive a numbered wristband that they will need to wear. The corresponding number will be written on the child's name label. When picking up your child, the number on the wristband will be matched up. Please return the bracelet when you pick up your child.

Programs may be cancelled due to severe weather, electrical failure, or other unforeseen circumstance beyond our control. The Saratoga Regional YMCA will make every effort to provide information about the cancellation to program participants on our website: www.saratogaregionalymca.org or via the media.

Aggressive behavior is not accepted. Parent/Guardians will be informed of the "incidents" of behavior. Staff will work with the parents and child to prevent further incidents. Repeated and/or patterned aggressive behavior will result in your child being unable to join us in the Babysitting Room.

Snack Policy

Due to the high number of food allergies and in order to provide the best care while your child is in the Babysitting Room, parents are not allowed to bring snacks for the children to eat while in the Babysitting Room. Parents can bring in drinks for their children, in a labeled cup or juice box. Please be sure the juice was not made in a place with nut products since it is a nut free environment. This is a safety precaution that we feel we need to take in order to make sure all our children are in the safest environment while they are in our care. We appreciate your cooperation and understanding with this policy.

Health

For health reasons we are not permitted to administer medication. If your child is ill with a communicable illness, diarrhea, cold, or fever, please keep him/her at home. If your child develops a communicable illness, it is important to notify the Babysitting staff immediately so we can notify other parents. Please remember to call and cancel your reservation if this should occur.

We do change diapers. Please have your child arrive in a clean diaper. You will need to supply your own diapers, wipes and a change of clothes if you think it will be necessary.

Reservation Procedure

Reservations are strongly recommended to ensure your child has a spot in Babysitting.

BABYSITTING IS LIMITED TO 2 HOUR CONSECUTIVE BLOCKS. CHILDREN MUST BE REMOVED FROM THE ROOM FOR AT LEAST ONE HOUR BEFORE THEY CAN RETURN.

Reservations can be made by calling the specific branch, 24 hours prior to the desired day. At the Saratoga Springs Branch you may make reservations anytime, in person, on the reservation boards located next to the Babysitting Room. All evening reservations and cancellations, at the Wilton Branch only, must be made by 12pm the day of your reservation.

Staff will ask each of you to legibly sign your child in and out each day. Please fill in your child's name, and time of arrival. When picking up your child please sign out with your initials and time. This is for the safety of your child and is very important

When making reservations please be careful to fill in all columns, especially your phone number. If we need to cancel we must have your phone number to notify you.

Cancellation Procedure

All cancellations must be made 1 hour prior to the scheduled reservation time. If you do not cancel your reservation you will be charged one hour per family on your Babysitting Card.

Late arrivals will be changed from the beginning of the reserved time. It is very important that you let us know if you cannot keep a reservation so that we may give your time space to another member.

Payment

Payment for babysitting services can be made in advance by purchasing a card at the front desk. The fee is \$2.00/hour. Cards come in \$12.00 and \$24.00 amounts. Cards will be marked when the children are picked up

YMCA Mission Statement

The mission of the Saratoga Regional YMCA is to put Judeo-Christian principles into practice through programs that build healthy spirit, mind, and body for all. The YMCA welcomes men, women, and children of all ages, incomes, abilities, races and religions

SARATOGA REGIONAL YMCA BABYSITTING ENROLLMENT INFORMATION FORM

Child's Name _____ Today's date: _____

Nickname _____ Birth date ___/___/___ Male__ Female__

Home Address _____

City _____ Zip Code _____ Home Phone _____

Sibling's Names _____ Ages _____

Parent/Guardian#1 _____

Address _____

City _____ Zip Code _____ Home Phone _____

Employer _____ Work Phone _____

Cell Phone _____ E-Mail _____

Parent/Guardian#2 _____

Address _____

City _____ Zip Code _____ Home Phone _____

Employer _____ Work Phone _____

Cell Phone _____ E-Mail _____

Note: Court orders are needed if a parent is denied access to a child.

Medical (Please include a copy of your child's immunization records with the completed enrollment form)

Medications child is presently taking _____

Allergies _____

In case of an allergic reaction, what action should be taken? _____

Date of Child's last Tetanus shot: ___/___/___

Family Physician _____ Phone # _____

Does your child have any disabilities? Hearing Speech Vision Seizures Other

(If so, please describe below)

Physical Handicaps _____

EMERGENCY CONSENT TO RELEASE STATEMENT

I give permission for my child to be released from the YMCA Babysitting program with the following people in the event of an emergency. I further understand that the people listed below must show identification for my child to be released. Parents/Guardians must remain on the premises or with a YMCA staff led program throughout the duration of your child's stay in Babysitting Room.

EMERGENCY CONTACTS (If parents/guardians can not be reached)

1. Name _____ Relationship to child _____

Home# _____ Work# _____ Cell/pager _____

2. Name _____ Relationship to child _____

Home# _____ Work# _____ Cell/pager _____