



# YMCA OF DANE COUNTY, INC.

## CHILD CARE BRANCH CHANGE OF ENROLLMENT

Child's Name \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_  
First Middle Initial Last

Reason for change \_\_\_\_\_

A \$20 fee will be charged for changing days within a week. Deposits are collected with adding a week or forfeited with dropping a week.  
 A 2 week written notice must be given to change enrollment. A 4 week written notice is required to terminate enrollment

CURRENT ENROLLMENT		Site	DESIRED ENROLLMENT			*3 day minimum	Site
After School*	M T W R F		<input type="checkbox"/> No change	M T W R F	<input type="checkbox"/> Drop		
Before School*	M T W R F		<input type="checkbox"/> No change	M T W R F	<input type="checkbox"/> Drop		
Late Start	M		<input type="checkbox"/> No change	M	<input type="checkbox"/> Drop		
Part Day Preschool	M T W R F		<input type="checkbox"/> No change	M T W R F	<input type="checkbox"/> Drop		
Full Day Preschool	M-F		<input type="checkbox"/> No change	M-F	<input type="checkbox"/> Drop		

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

**OFFICE USE:** Received By: Staff Initials \_\_\_\_\_  \$20 Collected By: \_\_\_\_\_ (to change enrollment not drop program)

**ADMIN USE:**  Notify family of new rate  Paid in full if drop  Copy to Site  Registration changed  Billing changed  Family notified to confirm available and effective change date.

Form Complete (Staff Initials) \_\_\_\_\_