



# 87<sup>th</sup> FSS Instructional Programming CYP Program Agreement



2022-2023 Registration.

Authority: Title 10, United States Code, Section 3013  
 Principal Purpose: Information is used by DOD personnel and patrons to:  
 (1) Identify and clarify responsibilities of all parties involved in agreement.  
 (2) Specify commitment regarding acceptance and provision of CYP services.  
 Routine Uses: Information provided may be released IAW the Privacy Act System Notice F034  
 AF SVA Child Development/Youth Programs Records applies.  
 Disclosure: Disclosure of requested

Please fill in the information below for the child being registered.

|  |  |  |   |  |  |
|--|--|--|---|--|--|
| <b>Child's Last Name:</b>  |  | <b>Child's First Name:</b>   |   |  |  |
| <b>Child's Date of Birth:</b><br>____/____/____<br>Month Day Year        | <b>Child's Gender:</b><br><i>Circle One</i><br>Male Female | <b>Current School Grade:</b><br>_____<br>(PreK-12)   | <b>Agreement Date:</b><br><b>FROM:</b> ____/____/____<br>Month Day Year<br><b>TO:</b><br>Contract renegotiation between JBMDL and the Vendor. |  |  |
| <b>Name of Sponsor:</b><br>_____<br>Please print (Last Name, First Name) |  | <b>Sponsor Status:</b> <i>Circle One</i><br>Active Retired DOC Civilian Contractor<br><b>Sponsor Branch:</b> _____ |   |  |  |

Full Addresses for the Programs listed in the chart below are as follows:

McGuire Youth Programs:  
3830 East Scott Street  
JB-M 08641

Dix Youth Programs:  
1279 Locust Street  
JB-D 08640

Dix Teen Center:  
691 Juliustown Road  
JB-D 08640

Please initial next to the programs in which you are enrolling your child.

| Selection | Class Title                 | Ages          | Days      | Time        | Location           | Fee   |
|-----------|-----------------------------|---------------|-----------|-------------|--------------------|-------|
|           | Piano                       | 7 - 18        | Tuesday   | 1530-2000   | Dix Teen Center    | \$100 |
|           | Piano                       | 7 - 18        | Wednesday | 1530-1830   | Dix Teen Center    | \$100 |
|           | Jiu Jitsu Level 1           | Grades K-5    | Monday    | 15:30-16:30 | Dix Youth Programs | \$120 |
|           | Jiu Jitsu Level 2           | Grades 6-12   | Monday    | 16:30-17:30 | Dix Youth Programs | \$140 |
|           | Mommy, Daddy, & Me (Karate) | 2-3 w/ Parent | Tuesday   | 11:00-11:30 | Dix Youth Programs | \$120 |

|  |                                  |          |           |             |                        |       |
|--|----------------------------------|----------|-----------|-------------|------------------------|-------|
|  | Little Dragons (Karate)          | 4-6      | Tuesday   | 11:30-12:15 | Dix Youth Programs     | \$130 |
|  | Young Dragons (Karate)           | 7 and up | Tuesday   | 12:15-1:00  | Dix Youth Programs     | \$140 |
|  | Polliwog /Leap Frogs             | 4-6      | Thursday  | 9:30-10:15  | McGuire Youth Programs | \$55  |
|  | Tadpoles Gymnastics              | 3-4      | Thursday  | 10:15-11:00 | McGuire Youth Programs | \$55  |
|  | Little Tad Gymnastics            | 18M-3Y   | Thursday  | 11:00-11:30 | McGuire Youth Programs | \$50  |
|  | Baby & Me Gymnastics             | 18M-3Y   | Monday    | 12:00-12:45 | McGuire Youth Programs | \$100 |
|  | Little Leapers                   | 3-5      | Monday    | 1:00-1:45   | McGuire Youth Programs | \$120 |
|  | Youth Gymnastics                 | 6-9      | Monday    | 2:00-2:30   | McGuire Youth Programs | \$132 |
|  | Mighty Cheer                     | 4-14     | Wednesday | 18:00-19:30 | McGuire Youth Programs | \$50  |
|  | Advanced Cheer                   | 4-14     | Wednesday | 18:00-19:30 | McGuire Youth Programs | \$90  |
|  | Dance with Me-Creative Movements | 18M-3Y   | Wednesday | 10:00-10:45 | Dix Teen Center        | \$65  |
|  | Dance with Me-Creative Movements | 18M-3Y   | Wednesday | 15:30-16:15 | Dix Teen Center        | \$65  |
|  | Dance with Me-Creative Movements | 18M-3Y   | Thursday  | 10:00-10:45 | Dix Teen Center        | \$65  |
|  | Dance with Me-Creative Movements | 18M-3Y   | Thursday  | 15:30-16:15 | Dix Teen Center        | \$65  |
|  | Combination Ballet & Tap         | 4-5      | Wednesday | 10:45-11:30 | Dix Teen Center        | \$65  |
|  | Combination Ballet & Tap         | 4-5      | Wednesday | 16:15-17:00 | Dix Teen Center        | \$65  |
|  | Combination Ballet & Tap         | 4-5      | Thursday  | 10:45-11:30 | Dix Teen Center        | \$65  |
|  | Combination Ballet & Tap         | 4-5      | Thursday  | 16:15-17:00 | Dix Teen Center        | \$65  |
|  | Jazz – Mini Hop: Ages            | 5-8      | Wednesday | 17:00-17:45 | Dix Teen Center        | \$65  |
|  | Jazz – Mini Hop: Ages            | 5-8      | Wednesday | 17:00-17:45 | Dix Teen Center        | \$65  |

**Total Monthly Fee:**

\_\_\_\_\_ *Please Initial*

## ***Policies:***

\_\_\_\_\_ *Please Initial*

### **SERVICES WILL NOT BE AVAILABLE ON**

1. On **ALL** Federal Holidays and December 24 – January 1 (No refunds will be given)
2. If the Sponsor will be notified in advance, whenever possible, of additional periods of non-service as determined by JB-MDL Leadership.
3. If your child may be denied service when illness precludes participation in routine Program Activities.
4. As a result of natural events beyond our control, which cause less than three days closure, are not refundable. **Examples of this include, but are not limited to, snowstorms, hurricanes, water line breakage, power outages, etc.**

**ADMINISTERING MEDICATIONS**

Please  
Initial

Instructional programs are unable to administer medication to your child in accordance with AFI 34-144 para 13.5 and AFI 34-144 para 13.5.1

**CHILD ABUSE PREVENTION**

Please  
Initial

Sponsor acknowledges a shared responsibility with the 87<sup>th</sup> FSS CYP for child abuse prevention. See AFI 34-248 8.1 – 8.11 (Child Development Center), AFMAN 34-251 6.4 (School Age Programs) and AFMAN 34-249 2.2.9 (Youth Programs). All contracted Instructors receive training on Child Abuse Prevention and are mandatory reporters of any suspected abuse.

**CARE OF CHILDREN**

Please  
Initial

1. If my child becomes ill or injured, the child must be removed from the class.
2. We reserve the right to dis-enroll any child from the program who exhibits behaviors which endanger the safety and well being of other children or staff or who cannot adjust to class settings.

**PAYMENT/WITHDRAWAL/REFUND POLICY**

Please  
Initial

**1. PLEASE NOTE: SPONSORS WILL NOT BE PERMITTED TO REGISTER A CHILD FOR A NEW ACTIVITY IF THEY ARE IN ARREARS IN ANY CYP PROGRAM.**

2. Payment obligation is based on hours the program is in operation, not on actual hours of child’s attendance, unless they exceed the hours contracted for.
3. Fees will **NOT** be reduced or refunded for any absences of my child(ren) due to illness, family emergency, TDY’s, base family days, vacations, or scheduled days of non-service as stated in this agreement.
4. Fees are due **prior** to services being rendered and are collected in advance. Patrons are required to provide a valid credit card or debit card at time of registration.
5. **Payment is due on the 1<sup>st</sup> of each month.** Failure to pay by the 2<sup>nd</sup> business day after the payment due date will result in the Sponsor’s credit card/debit card being charged for fees due. A late payment fee may also be charged.
6. Failure to pay by the due date may result in denial of service and removal from the class roster. If you later decide that you want to return to the program(s), you will be placed at the bottom of any active waiting lists and will required to register again.
7. **Sponsors are required to provide advance written notice of their intent to withdraw from the program no later than the 20<sup>th</sup> of the month prior to withdrawal. Failure to submit a written withdrawal form by the deadline will result in payment being required for the following month. Non-attendance at class does NOT constitute a withdrawal and you will continue to be billed until you submit a written withdrawal notice.**

Please  
Initial

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**FINAL VERIFICATION:**

Registered For: \_\_\_\_\_

Monthly Fee: \_\_\_\_\_

By signing below, I am agreeing to register my child for the selected programs. I acknowledge that I have been given a Parent Information Letter, which outlines all policies and requirements of the specific program in which my child is being enrolled and agree to be bound to the terms stated therein.

Sponsor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

CYP Representative: \_\_\_\_\_

Date: \_\_\_\_\_