



NORTHAMPTON PUBLIC SCHOOLS: HRYMCA SCHOOL AGE CHILDCARE ENROLLMENT 2026/2027

[Please Print Single Sided](#)

Child's Name: _____ 2026/27 Grade: _____

Guardian's Name and Relationship to Child: _____

Address: _____

Phone: () - Email: _____

Child's School: Jackson Street School Bridge Street School Ryan Road School

First Day of NPS HRYMCA Afterschool: Grades 1st – 5th: Tuesday, September 8th, 2026
Kindergarten: Wednesday, September 9th, 2026

SCHOOL YEAR 2026–2027 MONTHLY SACC AFTERSCHOOL RATES

Program Hours: 2:10pm – 6:00pm	2 DAYS TUE/THU	3 DAYS MON/WED/FRI	5 DAYS MON-FRI
YMCA Family Member Rate*	\$195.00	\$265.00	\$455.00
Non-Member Rate	\$235.00	\$315.00	\$545.00

*A YMCA Family membership must be active by the 1st of the month to receive the member rate for the upcoming month

Please select one enrollment option:

Tuesdays/Thursdays Mondays/Wednesdays/Fridays Monday-Friday

If enrolling prior to September 1st, 2026, you must pay a **\$50 non-refundable deposit** to reserve your child's spot in the program. September's program payment, minus the deposit, is due on September 1st, 2026. If enrolling after September 1st, 2026, your first month's payment is due at time of enrollment to reserve your child's spot in the program.

(OPTIONAL) HALF DAY ADD-ON – THIS OPTION WILL NOT BE AVAILABLE AFTER AUGUST 31ST

Regular SACC Afterschool enrollment does not include care on early release days and early release days are not factored into the monthly rate. If you choose this Half Day Add-On option, your child will be automatically enrolled in the HRYMCA's childcare on all early release days. You may choose to add Half Days to your monthly payment or prepay for all Half Days for the entire year. Failure to attend an early release day will not result in credit on your account.

If you choose not to add Half Days to your enrollment, you may still enroll in care on individual early release dates as they occur for an additional fee, if space is available. Enrollment for individual early release dates opens a few weeks prior to the date.

Half Day Program Hours: 11:15am – 6:00pm	MONTHLY ADD-ON	PREPAID FOR ENTIRE YEAR	INDIVIDUAL DATE ENROLLMENT
YMCA Family Member Rate	\$48.00/month	\$480.00/year	\$45.00/day
Non-Member Rate	\$57.50/month	\$575.00/year	\$55.00/day

(Optional) Half Day Monthly Add-On (Optional) Half Days Prepaid for Entire Year



PAYMENT AGREEMENT: HRYMCA SCHOOL AGE CHILDCARE ENROLLMENT 2026/2027

Please initial the payment agreement

_____ All families with children enrolled in SACC must have a HRYMCA CORE account and a payment method on file.

_____ Drafts will be processed on the 1st of the month for that month of care. If the 1st falls on a holiday or weekend, the draft will be processed the next business day.

_____ Any changes to your child's enrollment must be submitted before the 1st of the month prior to the month of care.

_____ Should any charge not be honored by my bank for any reason, I realize that I am still responsible for that payment plus a \$25.00 service charge applied by the YMCA. This is in addition to the service fee my bank may charge. Guardians that default on two bank drafts will be ineligible for Bank Draft and will need to pay one month in advance for care.

Please select a payment method

Bank Draft

Credit/Debit Card

If your chosen payment method is already on file with us on your online HRYMCA CORE account, please list the last 4 digits of the account. If your chosen payment method is not on file, please include all of your payment method details below or call the Welcome Center at 413-584-7086 to add the payment method to your account.

Name on Card:	
Card # (or last 4 digits if on file):	
CVV:	Expiration:

Do you currently have, or plan to apply for, HRYMCA Financial Aid? Yes No

Do you currently have, or plan to apply for, a state voucher (Seven Hills)? Yes No
You must have a payment method on file even if you have a state voucher

I acknowledge receipt of the above payment plan and understand and agree to the terms states herein. I authorize Hampshire Regional YMCA to charge my credit/debit card or draft from my bank account the fees stated in the enrollment form. The Authorization remains in effect until I cancel such authority. I understand that if my payment is not received by Hampshire Regional YMCA by the 1st of the month prior that my child may not be allowed to participate in the program until all fees are paid and current.

Child's Name: _____

Guardian's Signature: _____

Date: _____