

# GROWING FUTURE LEADERS

## 1-2-3 Grow & Preschool Fit-N-Fun

“Providing financial assistance for your YMCA friends for over 145 years - find out if you qualify today”

### **Binghamton Branch**

61 Susquehanna Street  
Binghamton, NY 13901  
Tel: (607) 772-0560  
Fax: (607) 772-0563

### **West Family Branch**

740 Main Street  
Johnson City, NY 13790  
Tel: (607) 770-9622  
Fax: (607) 729-4977

Visit us on the web

[www.ymcabroome.org](http://www.ymcabroome.org)



**FOR YOUTH DEVELOPMENT®**  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

### **1-2-3 GROW**

- A class for children ages 1, 2, and 3.
- Parent and child participate in a fun-filled 45 minute class.
- Program provides a stimulating learning environment, basic motor skills, songs, and games.



### **PRESCHOOL FIT-N-FUN**

- A class for children ages 3, 4, and 5.
- Preschool children participate in a 45 minute program involving fun games, songs, and craft activities.
- Class is designed to introduce children to physical fitness and peer socialization.

# 1-2-3 Grow & Preschool Fit-N-Fun

## Program Information

### PROGRAM FEES:

**Monthly Fees**  
**for a once-a-week class:**

**Members:** \$10/Month

**Non-Members:** \$20/Month

### CONTACT INFORMATION

Primary:

**Sara Eppolito**  
Youth Sports and Leagues  
607-770-9622 ext. 114  
seppolito@bcymca.com

Secondary:

**Dan Smith**  
Team Leader  
607-770-9622 x107  
dsmith@bcymca.com

### 1-2-3 Grow and Preschool Fit-n-Fun Registration Form

Child's Name: \_\_\_\_\_ Birth date: \_\_\_/\_\_\_/\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

### Please circle which class you would like to participate in:

#### 1-2-3 Grow

Monday: 9:30 - 10:15am  
Tuesday: 10:00 - 10:45am  
Thursday: 10:00 - 10:45am  
Friday: 9:30 - 10:15am

#### Preschool Fit-n-Fun

Monday: 10:30 - 11:15am  
Tuesday: 11:00 - 11:45am  
Thursday: 11:00 - 11:45am  
Friday: 10:30 - 11:15am

### Please circle which months you would like to register for:

January      February      March      April  
May      June      July      August  
September      October      November      December

In consideration of you accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself and my child waive and release any and all rights and claims for damages I may have against the Broome County YMCA, their representatives, successors, and assigns for any injuries suffered by me in the YMCA Youth Program.

Parent Signature: \_\_\_\_\_

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

