



# COVINGTON YMCA

# Cheerios CHALLENGE CHILDCARE

**WHEN:** April 20, 2020, times TBA

**WHERE:** YMCA After-School Building  
(next to main building)

**AGES:** 3 months - 12

**COST:** Free for Y members  
\$ 10 per child for non-members

Children will participate in crafts, activities, and games in a safe and fun environment while you race! YMCA Staff Members who are 18+ years old, CPR & First Aid certified, and have completed background checks will supervise children. Parents/guardian must show ID or runner bib during child pickup.

During your race, you will wear a wristband identifying that you have a child in our childcare center. If you or your child are injured or get sick during your race, the Y staff will contact your designated non-running family member/friend. Volunteers along the race route will attempt to locate you as well.

## ENROLLMENT FORM AND ACKNOWLEDGEMENT - submit to Y by 04/11/2020

**Child Name:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

<b>Mother/Guardian:</b> _____ <b>Running:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Race(s):</b> <input type="checkbox"/> 10K <input type="checkbox"/> 5K <input type="checkbox"/> 1mi <b>Cell:</b> _____	<input type="checkbox"/> Authorized to pick up child
<b>Father/Guardian:</b> _____ <b>Running:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Race(s):</b> <input type="checkbox"/> 10K <input type="checkbox"/> 5K <input type="checkbox"/> 1mi <b>Cell:</b> _____	<input type="checkbox"/> Authorized to pick up child

### Designated Non-Running Family Member/Friend (in case of emergency):

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

### Additional Authorized Release Persons: (other than parent/guardians/contacts above, must be 18+)

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Child Allergies:** \_\_\_\_\_

**Special Needs:** \_\_\_\_\_