



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

SHAWNEE MISSION NO SCHOOL DAYS ENROLLMENT FORM FREE AND REDUCED LUNCH SITES 2025-26 SCHOOL YEAR

Shawnee Mission School District

No School Days for September–November Free and Reduced Lunch Y Club Sites

This fee is half price for families currently enrolled in Y Club at Apache, Comanche, Crestview, Nieman, Overland Park and Rosehill schools during the 2025-26 school year.

Important Information about No School Days

- Hours are 7 a.m.-6 p.m.
- Register early. All registrations will close one week prior to the scheduled No School Day.
- Tuition is \$17.50 per child, per day. It is non-refundable and non-transferable. Payment is due at time of registration.
- **If child is not registered for 2025-26 Y Club**, you will be charged a \$35 one-time registration fee.
- You must bring a copy of your child's emergency packet to the No School Day location.
- You must bring a sack lunch. A morning and afternoon snack will be served.
- Programs are subject to cancellation when low enrollment occurs. Decisions will be made one week before the scheduled No School Day.

Registration Options

Online Preferred Method	Walk-In	Fax
KansasCityYMCA.org/YClub Online option closes one week prior to scheduled No School Day.	Association Resource Center 6901 Shawnee Mission Pkwy #300 Overland Park, KS 66202	816.931.1847 Credit card only.

Registrations will not be accepted at your child's school.

Choose Your Dates	Choose Your Location
<input type="checkbox"/> September 12 <input type="checkbox"/> November 3 <input type="checkbox"/> October 10 <input type="checkbox"/> November 24 <input type="checkbox"/> October 17 <input type="checkbox"/> November 25 <input type="checkbox"/> November 26	<input type="checkbox"/> Westwood View Elementary 4935 Belinder Ave, Westwood, KS 66205 <input type="checkbox"/> Comanche Elementary 8200 Grant Ave, Overland Park, KS 66204

Participant and Payment Information

Payment information is required only if you have not paid the Y Club registration fee for the year.

Child's name _____ School child normally attends _____

Parent's name _____

Home phone _____ Work or cell phone _____

Payment type Credit/Debit card Bank Acct (please attach voided check) DCF (EBT card)

Approved Scholarship % _____ Exp. Date _____

Amount due _____ Billing zip code _____

Payer Signature _____ Date _____

OUR MISSION

The YMCA of Greater Kansas City, founded on Christian principles, is a charitable organization with an inclusive environment committed to enriching the quality of family, spiritual, social, mental and physical well-being. A UNITED WAY AGENCY