



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# SPRING HILL NO SCHOOL DAYS ENROLLMENT FORM 2026-27 SCHOOL YEAR

**Spring Hill School District**  
**No School Days for September–November**  
**Hours: 7:00 a.m. – 6 p.m.**

## Information You Should Know About No School Days

- Register early. All registrations will close one week prior to the scheduled No School Day.
- Tuition is \$40 per child per day. **It is non-refundable and non-transferable.** Payment is due at time of registration.
- **If child is not registered for 2026-27 Y Club**, you will be automatically charged a \$80 one-time registration fee.
- 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<br>Online option closes one week prior to scheduled No School Day. | Association Resource Center<br>6901 Shawnee Mission Pkwy #300<br>Overland Park, KS 66202 | 816.931.1847<br>Credit card only. |

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

## Choose Your Dates

### Timber Sage Elementary

15800 W 173rd Terrace, Olathe, KS 66062

- ☐ September 8 ☐ November 24  
☐ October 15 ☐ November 25  
☐ October 16  
☐ November 23

## Participant and Payment Information

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)

Last 4 digits of card \_\_\_\_\_ Exp. Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Amount Due \_\_\_\_\_ Approved Scholarship % \_\_\_\_\_

Payer Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please make your payment for No School Day care separate from your weekly fee payment.**

### 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