Y BASE Change/Cancellation Form
Mill Creek Academy

Use this form only if child is already registered. Please use a separate form for each child.
All changes must be completed on the Wednesday 2 weeks prior to the start of the next session.

Child’s Name __________________________ School Location __________________________
Parent/Guardian Name __________________________ Email __________________________

CANCEL 2-WEEK SESSION

Requested Cancellation Date __________________________________________
Reason for Cancellation __________________________________________
☐ Permanent Cancellation ☐ Temporary Cancellation for session(s) __________________________

CHANGE ATTENDANCE

| Current Dates | AM | ☐ Mon | ☐ Tues | ☐ Wed | ☐ Thurs | ☐ Fri |
| PM | ☐ Mon | ☐ Tues | ☐ Wed | ☐ Thurs | ☐ Fri |
| New Dates | AM | ☐ Mon | ☐ Tues | ☐ Wed | ☐ Thurs | ☐ Fri |
| PM | ☐ Mon | ☐ Tues | ☐ Wed | ☐ Thurs | ☐ Fri |

☐ Permanent Change ☐ Temporary Change for session(s) __________________________

Y BASE PRICING

<table>
<thead>
<tr>
<th></th>
<th>1 DAY</th>
<th>2 DAYS</th>
<th>3 DAYS</th>
<th>4 DAYS</th>
<th>5 DAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM Only: Bi-Weekly Draft Total</td>
<td>$18</td>
<td>$36</td>
<td>$54</td>
<td>$72</td>
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<tr>
<td>PM Only: Bi-Weekly Draft Total</td>
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<tr>
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<td>$144</td>
<td>$192</td>
<td>$222</td>
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</tbody>
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* Half Days and School’s Out Fun Days are a separate registration

Please submit to Waukesha Y Business Desk or via email at registrar@gwcymca.org.

Changes and cancellations will be made according to the registration and change deadlines. You will receive a confirmation email once your child’s enrollment has been updated. Please allow 3 – 5 business days for processing.

I authorize the YMCA of Greater Waukesha County to adjust my regular payment based on the cancellation or change listed above using the payment method on file.

Parent/Guardian Signature __________________________ Date __________________________

For Office Use Only

START DATE __________________________ EFFECTIVE DRAFT DATE __________________________
☐ Schedule ☐ Enrollment ☐ Confirmation
DATE RECEIVED __________________________ STAFF INITIALS