



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

ACT! ACTIVELY CHANGING TOGETHER!

Learn Healthier Habits for Life

The ACT! program was developed in partnership with providers and professionals at Seattle Children’s and helps youth ages 8-14 years and their families actively change together by practicing healthier habits as a team.

Virtual Program Overview:

- 12 virtual group sessions, meeting 60 minutes each plus a mandatory orientation
- Zoom is used for the video conference platform
- A nutritionist and physical activity coach lead each session
- Parents or guardians join the program together with their kids
- Energizing games, activities, and light meals
- Referrals are welcome year-round

In-Person Program Overview:

- 12 group sessions, meeting 90 minutes each plus a mandatory orientation
- Y family membership to use between weekly sessions
- A nutritionist and physical activity coach lead each session
- Parents or guardians join the program together with their kids
- Energizing games, parent support group, activities, and light meals
- Referrals are welcome year-round

READY TO ACT! NOW?

A healthcare provider referral is required to enroll (may be a doctor, registered nurse, registered dietitian, or any licensed healthcare provider) . Youth must have a body mass index (BMI) ≥85th percentile. You and your child’s healthcare provider can complete this form and fax it to (844) 836-8957. The Y will contact interested families after receiving the referral.

Parent or guardian completes the following:

- I would like to receive more information about ACT!
- I am ready to reserve a spot in the ACT! program and confirm that this child is physically and emotionally able to participate in group physical activity

Child/Teen Name _____

Child/Teen Date of Birth _____

Parent/Guardian Name _____

Address _____

Preferred Contact Phone _____

Email Address (Required) _____

How did you find out about ACT? _____

Preferred Y Location _____

Additional Health Information (Allergies/Illnesses?) _____

Everyone is welcome. Financial assistance is available. The YMCA of Greater Seattle strengthens communities in King and south Snohomish counties through youth development, healthy living and social responsibility.

Provider completes the following:

I confirm this child/teen is eligible for ACT! with age 14 years and BMI ≥ 85th percentile for age

Child/Teen Height _____ Weight (kg) _____

Provider Name _____

Signature _____

Date _____

Clinic _____

Email or Fax _____

Questions? Contact us at (206)-432-8904 OR
ChronicDiseasePrevention@seattlemca.org
seattlemca.org/act

Submit Completed Referrals to:
(844)-836-8957 (Secure Fax)



Seattle Children’s
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