



Lindenhurst Park District

2200 East Grass Lake Road, Lindenhurst, Illinois 60046

847.356.6011 847.356.6063 Fax

www.lindenhurstparks.org

Dear Parents/Guardians:

The Before & After School Program is accepting registration for the 2011/2012 school year.

This packet contains all the necessary forms for registering your student(s). Please complete the forms and return them with the \$30.00 non-refundable registration fee.

We appreciate your interest in our program and look forward to welcoming your student(s) in the fall.

Any questions may be answered by calling our direct line at 847.812.3738 or emailing us at beforeandafter@lindenhurstparks.org.

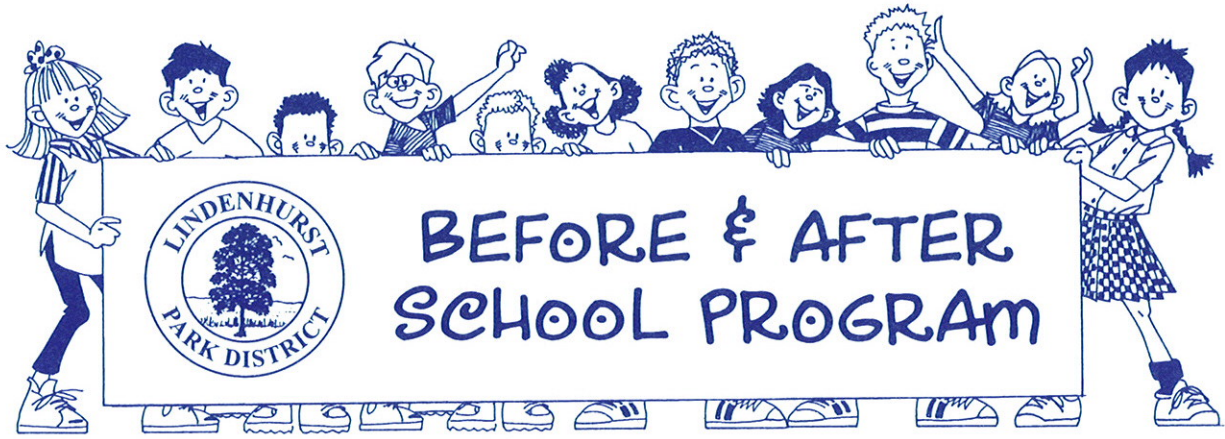
Sincerely,

Lindenhurst Park District
Before & After School Program

Enclosures:

Registration Form
Late Fee Policy
Child Information Sheet
Emergency/Medical Information
Child Release Authorization Parent Handbook





Lindenhurst Park District Before and After School Program Late Pick-up/Payment Policy

The Lindenhurst Park District Before and After School Program has adopted a policy for late pick-up from the program.

After 6:00pm, a five (5) minute grace period is allowed. After five (5) minutes an attempt will be made to contact the parents if they have not already contacted the Park District. After five (5) minutes a late fee of \$1.00 per minute will be charged.

We have also implemented a \$5.00 safety fee policy. We need to be notified by a phone call, email (beforeandafter@lindenhurstparks.org), letter or a note on our calendar or in person when your child will not be in attendance. If your child does not get off the bus and we haven't received notification, we spend the time it takes to track down your child to ensure their safety. Please be considerate and contact us.

Staff will use their discretion for an emergency situation. If late fees apply, they will be added to your weekly statement.

You will also be assessed a late fee of \$10.00 for each week of non-payment and your child WILL NOT be able to return to the program.

(Print Your Full Name)

(Signature)

(Date)

Registration Form **Before/After School Program**

LINDENHURST PARK DISTRICT

2200 E. GRASS LAKE ROAD • LINDENHURST, ILLINOIS 60046
 (847) 356-6011 • FAX (847) 356-6063 • www.lindenhurstparks.org
PLEASE PRINT

Start Date: _____

Primary Guardian Last Name _____ First Name _____ Home Phone () _____

Work P _____ Cell P _____ E-Mail address _____

Address _____ City _____ Zip Code _____

Emergency Contact _____ Emergency Telephone () _____

Please check this box if you wish someone to contact you regarding special accommodations to participate in the program.

Child's Name	Sex	Age	Birthdate	School	Grade	Kindergarten AM or PM	Teacher

Times	Codes	Mon	Tue	Wed	Thur	Fri
6:00 am until school starts						
Start of school until lunch						
Lunch until school dismissal						
School dismissal until 6:00 pm						

Would you like to donate to our participant scholarship? Yes No \$1.00

WAIVER AND RELEASE OF ALL CLAIMS **TOTAL**

IMPORTANT INFORMATION

The Lindenhurst Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Lindenhurst Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the below listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Lindenhurst Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the programs listed below, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with these programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Lindenhurst Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PLEASE PRINT: Participant's Name _____ Date _____

Participant's Signature (18 years or older or Parent / Guardian): _____

PARTICIPATION WILL BE DENIED If the signature of adult participant or parent / guardian and date are not on this waiver.

TOTAL ENCLOSED \$ _____ Cash Check # _____ VISA MasterCard Discover

Credit Card Number: _____ Security Code () _____ Exp. Date: _____



Child Information Sheet

Name: _____
(Please Print)

Nicknames: _____

Is this your child's first experience in a Before/After School Program? _____
If no, please explain. _____

Tell us about your child's personality. _____

What does your child like to do for fun? _____

Would you be willing to volunteer your time to help with parties, special events sharing a special talent? _____

Is there anything else that you would like to share with us about your child? _____

