



The Buffalo Grove Park District presents Spanish at Kildeer School

DISCOVERY
FOREIGN LANGUAGE INSTRUCTION

Tuesdays
October 1 - January 14
Breezeway

No class November 26, December 10, 24 & 31
3:05 - 3:50 p.m.

Fee: \$169

Discovery's teaching method uses a natural, oral approach with gradual immersion. Students will gain oral language skills through games, songs and hands-on activities. Reading and writing skills are introduced when age appropriate. Children will begin to learn through projects, vocabulary lists, homework and cultural notes.

Research shows that children are most receptive to language learning between birth and 12 years, and that exposure to foreign language at an early age improves self-esteem, creativity and mental flexibility.

Why should children learn a second language?

- The earlier a foreign language is introduced, the more easily a greater level of understanding and fluency is achieved. Early language learning also fosters a healthy and global attitude which may set the tone for all academic endeavors.
- Children who know more than one language have greater levels of success in other areas of study, including reading, writing, grammar, social studies and history. On average, students score higher on ACT and SAT tests.
- Studying a foreign language makes children more aware of other cultures and more likely to understand and relate to different types of people.
- Knowledge of a foreign language is a definite advantage in many careers and is clearly becoming a marketable asset.

On-line registration is available at bgparkdistrict.org
Set up your account today!

Forms can be faxed to:
(847) 459-5741

or mailed to:

The Buffalo Grove Park District
530 Bernard Drive
Buffalo Grove, IL 60089



Student Name _____ Birth Date _____ Gender _____ Home Phone _____

Parent Name _____ Parent contact phone number after school _____

Street Address _____ City _____ State _____ Zip Code _____

Parent's e-mail _____

Grade _____ Teacher _____

Payment (Payable to Buffalo Grove Park District)

Class # 39828

Cash Check Credit Card (V/MC/ Discover)

Name on Card _____

Card Number _____ Exp _____

Signature _____ Date _____

Waiver and Release of All Claims - Must Be Signed By Parent

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in Buffalo Grove Park District programs, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of said programs.

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I or my child/ward may sustain as a result of participating in any activities connected or associated with any such program(s). I waive and relinquish all claims I or my child/ward may have against the Park District and its officers, agents, servants and employees as a result of participant in any of the above program(s). I hereby fully release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of the above program(s). I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or by my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). **Photo Disclaimer:** Registrants and participants of programs and special events permits the Park District to take photos and videos of themselves and their children for publication in the program brochure, web site and additional uses as the Park District deems necessary unless the registrant or participant expressly files with the Park District a written objection as to photos or videos of themselves and/or their children.

I have read and fully understand the program details and waiver and release of all claims.

Parent's Signature _____ Date _____