



Welcome to the Clubhouse program of the Buffalo Grove Park District! Enclosed you will find all of the forms you need to fill out to finalize your child's registration in the Clubhouse program.

The enclosed forms are due to the Clubhouse office no later than Sunday, July 14, 2013 at 11:59 pm. Due to varying registration numbers, forms received after this date <u>may</u> be placed on a waitlist. The Clubhouse office will contact you if your child needs to be placed on a waitlist. If openings are available at your school we will contact you once we are able to place your child into the program.

Explanations of the forms to be completed and returned are as follows:

- <u>Registration Form</u>: First day of Clubhouse attendance, School name, Clubhouse T-shirt size, special information and ADA accommodations (if necessary). Please check the days that you will be utilizing our program on the Registration Form and fill in the correct monthly fee for the days of service that you are requiring on the Payment Agreement Form. A fee schedule is included with this packet. Due to the high volume of registration processing, schedule changes will not be accepted affecting the months August and September 2013.
- 2. <u>Emergency Contacts and Pick Up Permission Form</u>: Please list additional pick up people for your child.
- 3. <u>Clubhouse Parent Handbook Form</u>: Please sign indicating you read the current year's handbook
- 4. <u>Payment Agreement Form</u>: Complete only one section (either Credit Card or Direct Debit) of the Payment Agreement Form. Please complete all information requested in its entirety. Please notice you will save \$5 on tuition payments if you opt for direct debit from your checking or saving account.

The first day of school for District 102 is Thursday, August 22, 2013. If you need to **change the start date** for your child, please email either Melissa or Bryan at the below email addresses. Thank you for choosing the Clubhouse program!

Sincerely,

Melissa Lewis Clubhouse Director Office: (847) 850-2134 Fax: (847) 459-0674 mlewis@bgparks.org Bryan Adams Clubhouse Assistant Director Office: (847) 850-2119 Fax: (847) 459-0674 badams@bgparks.org

Forms may be emailed (signing), mailed, faxed or dropped off in our white drop box at: 530 Bernard Drive, Buffalo Grove, IL 60089.





Enclosed you will find several documents that need your attention.

Forms and documents to be completed and returned

- Clubhouse Registration Form
 - Your Clubhouse Start Date
 - School
 - Clubhouse T-Shirt
 - ADA
 - Days Child Will Attend (Mornings and/or Afternoons)
 - Allergies, Special Needs, Etc.
 - Medication Needed (# 2 on Registration Form). If yes, please go to the Clubhouse webpage to complete form and return with this packet. (bgparkdistrict.org/pr_clubhouse.htm)
 - Family (# 3 on Registration Form)
- Emergency Contacts and Pick-Up Permission Form
- Payment Agreement Form
- Blank **voided** check, if applicable
- Clubhouse Parent Handbook Signature Page document

Complete all forms above and return by: <u>Sunday, July 14, 2013 at 11:59 pm</u>

Due to varying registration numbers, forms received after this date <u>may</u> be placed on a waitlist. The Clubhouse office will contact you if your child needs to be placed on a waitlist. If openings are available at your school we will contact you once we are able to place your child into the program.

If you have any questions please don't hesitate to contact us at (847) 850-2134 or (847) 850-2119.



BUFFALO GROVE PARK DISTRICT CLUBHOUSE REGISTRATION FORM – 2013/2014

	STRATION FORM - 2013/2014		<u>Clubhouse Start Date</u>
Child's Name:	Last Name:	Sex:	Please enter the date your
Address:	City:	Zip:	child will begin:
Home Phone:	Age:Grade in 2013-14:E	Birth Date:	
Mother's Name:	Mother's Home Phone:		**Notice of 48 business hours
Mother's Work Phone:	Mother's Cell Phone:		required for processing
Father's Name:	Father's Home Phone:		School District 102
Father's Work Phone:	Father's Cell Phone:		Please Select One:
Preferred email address (please print legibly): _			Pritchett
	g our program and fill in the correct monthly fee for the days of service chedule that is included with this packet to use on the Payment Agree		Tripp
Mornings: 🗆-Mon. 🗆-Tues. 🗆-Wed.	□-Thurs. □-Fri. Afternoons: □-Mon. □-Tues. □-We	ed. □-Thurs. □-Fri.	Clubhouse T-Shirt
	ronic illness, medications/dosages, or other medical information Pa well as any further information that you believe will be helpful to staff		Please Select One: Youth 6-8 Youth 10-12
2.) Will medication need to be given between Form via website bgparks.org.	n 7am - 6 pm?YesNo. If yes, please complete Media	cation Dispensing Info.	Youth 14-16
	mily concerns that our staff should be alerted to?Yes^	No. If yes, please explain:	Adult Small
(page 2 of the Clubhouse Parent's Handbook) WAIVER AND RELEASE OF ALL CLAIMS			Adult Medium
Please read this form carefully and be aware that in registe and releasing all claims for injuries you or your child/ware injury to participants in the program(s) for which I have reg	e are certain risks of physical	Adult Large Additional order form available online	
child/ward may sustain as a result of participating in any have against the Park District and its officers, agents, serve Park District and its officers, agents, servants and employee me or my child/ward on account of my participation or th defend the Park District and its officers, agents, servants an child/ward, and arising out, connected with, or in any we and special events permits the Park District to take photos of	activities connected or associated with any such program(s). I waive and relinquish of ants and employees as a result of participation in any of these program(s). I hereby fur- es from any and all claims from injuries, damage or loss which I or my child/ward m are participation of my child/ward in any of these program(s). I further agree to indem and employees from any and all claims resulting from injuries, damages and losses sus ay associated with the activities of any of the program(s). Photo Disclaimer: Registra and videos of themselves and their child/ward for publication in the program brochu r participant expressively files with the Park District a written objection as to photos or	all claims I or my child/ward may ully release and discharge the nay have or which may accrue to mnify and hold harmless and stained by me or by my ants and participants of programs ure, website and additional uses	Please describe any accommodation (i.e. ADA) needed for your enjoyment of this program:
Signature of Parent/Legal Guardian	Relationship to Child	Date	
<u>* */\</u>	lotice of 48 business hours required for processing		

I understand that it is my responsibility to submit all changes in writing to the Clubhouse Office (Forms available at school sites or on the Clubhouse website)



Buffalo Grove Park District CLUBHOUSE EMERGENCY CONTACTS AND PICK-UP PERMISSION FORM – 2013/2014

Child's Name: _____

Last Name: _____

School: _____

The people listed below shall be contacted in the event of an emergency or illness when the parents/guardians are not available. In addition, those listed below will be the o persons allowed to pick-up the participant besides the parents. Unless court ordered documentation <u>(on file at the Park District)</u> is provided to show otherwise, both parents are automatically authorized to pick up their child. Under no circumstances will a child be released to any other person than those listed below unless Clubhouse is given permission in writing by one of the participant's parents/guardian. The staff will ask for identification from the person picking-up your child, so please make sure that every person listed below has some form of photo identification with them when retrieving your child.

* * If there is another parental figure in your child's life, please complete the following information:				
Name:		Relationship to Child:		
Home #:	Work #:	Cell #:		

Name (Please rank in order to contact)	Relationship	Home Phone #	Work Phone #	Cell Phone #

I understand that if a person not listed above will be picking-up my child/ward on a regular basis, or any of the supplied information above changes, it is my responsibility to submit the changes in writing (by completing a "Change of Information Form") to the Clubhouse office. I further understand that if a person not listed above is picking-up my child/ward, even one time, it is my responsibility to inform Clubhouse in writing (by completing an "Exception to Departure Procedure Form"). I am fully aware that under no circumstances will the Clubhouse program deviate from their stated policies regarding child pick-up.

Buffalo Grove Park District CLUBHOUSE PARENT HANDBOOK

Signature Page 2013/2014

The Clubhouse Parent Handbook can be found on the Buffalo Grove Park District Website bgparkdistrict.org/pr_clubhouse.htm.

__I hereby acknowledge and affirm I have read the on-line version of the Buffalo Grove Park District Clubhouse Parent Handbook and I agree to adhere to the stated policies and/or procedures.

_I am unable to access an on-line version. Please send me a hard copy of the Buffalo Grove Park District Clubhouse Parent Handbook. I further acknowledge that it is my responsibility to read and agree to adhere to the stated policies and/or procedures.

Child Name (please print)

Child School

Parent Name (please print)

Parent Signature

Date



Buffalo Grove Park District CLUBHOUSE PAYMENT AGREEMENT FORM

Child's Name:	Home Phone #:	School:	
Address:	City:	Zip:	
	, 		

I am responsible for the monthly payment of \$_____, which will be debited in nine installments on the 1st or 15th of each month.

In the event of any absences during program hours/activities, I will be responsible for fees for time reserved, not actual time spent at the program. In addition, a failure to report absence fee will be assessed if Clubhouse is not contacted prior to the participant's absence.

<u>Credit Card Automatic Payment Agreement (only select one option):</u>

Credit card payments that are declined will be charged a \$15.00 service fee by the Buffalo Grove Park District. If a credit card payment is declined, payment must then be resubmitted with the \$15.00 service fee in the form of cash, money order, check, cashier's check or an alternative credit card. If a parent/guardian is delinquent on a child's account, and does not submit payment within one week of the delinquency, the child will be removed from the program.

If you wish to discontinue your credit card automatic payment agreement and pay in full, report your credit card lost, stolen, compromised or provide a current expiration date, you must notify the Buffalo Grove Park District office: Attn: Clubhouse Director in writing (forms are available at the Park District and on line at bgparkdistrict.org) within five business days prior to the posting.

If you wish to change to a different credit card you must notify Office Manager in writing (forms are available at the Park District and online) within five business days prior to the posting and include a \$5.00 service fee. Payment for this service fee can be made by credit card check, cash or money order. If notification is not received five business days prior to the posting and there is a decline for any reason there is a \$15.00 service fee.

Cardholder Name<u></u>

Credit Card Number_____

Exp. Date:_____

Date:____

I (we) give permission for the Buffalo Grove Park District to charge the amount from the account previously indicated, on the 1st or 15th of each month, beginning on ______ and ending on <u>May 1 or May 15, 2014</u>

Credit Card Auto Payment Authorized Signature_____

Direct Debit Tuition Payment Agreement (only select one option):

Electronic fund transfers that are denied due to insufficient funds will be charged a \$15.00 service fee by the Buffalo Grove Park District. If a payment is returned for insufficient funds, payment must then be resubmitted with the \$15.00 service fee in the form of cash, money order, credit card, check or cashier's check. If a parent/guardian is delinquent on a child's account, and does not submit payment within one week of the delinquency, the child will be removed from the program.

If you wish to change the form of payment from automatic withdrawal to credit card debit, or to another account, you must notify the Buffalo Grove Park District office: Attention Office Manager in writing (Schedule Change Forms are available at the Park District and on line at bgparkdistrict.org) within five business days prior to the posting. There will be a \$5.00 fee charged for each change.

PLEASE ATTACH A VOIDED BLANK CHECK

I (we) authorize Buffalo Grove Park District, to initiate debit entries to my (our) checking/savings account indicated below and the bank named below, hereinafter called "Institution", to debit the same such account. I (we) further authorize Buffalo Grove Park District to initiate credits to my (our) account to correct any errors and "Institution" to initiate any such corrections to my (our) account. This authority is to remain in full force and effect until Buffalo Grove Park District and "Institution" has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Buffalo Grove Park District and "Institution" a reasonable opportunity to act on it prior to withdrawing or depositing to the account. I (we) give permission to the Buffalo Grove Park District to debit the amount from the account indicated, on the 1st or 15th of each month, beginning on _______ and ending on <u>May 1 or May 15, 2014.</u>

Direct Debit Information: Check bank account you want your payment withdrawn from:	Checking:
Name(s) on Bank Account:	Savings:
Bank Account Number:	
Bank Transit ABA (Routing Number):	
Direct Debit Tuition Payment Authorized Signature	Date:

CLUBHOUSE FEE SCHEDULE SCHOOL YEAR 2013-2014

School District 102 Pritchett & Tripp

Dates Of Operation: First day of school to the last day of school

Payments:

*We have computed nine equal monthly payments for the Clubhouse program.

*Payments will be due on the 1st or 15th of each month, beginning with September and ending with the May payment.

*The individual's monthly payments are dependent upon their needs. The program is available for two through five day per week options. You can register for morning or afternoon service, or both.

*The fees listed are per child. There are no discounts for multiple siblings in the program.

*There are 2 hours of service in the mornings and 2.5 hours of service in the afternoons. The fees are based on 175 days of service.

*Forms of payment that are accepted are: automatic debit to your checking or savings account, OR automatic debit to your debit/charge card (MasterCard, VISA, or Discover).

*Fees include regular school days, half-days and early release days. School holidays and institute days are not included in the below fees. They may be purchased at an additional cost.

*You will notice that there is a \$5 savings in fees if you have a <u>Bank Account Debit</u>. This \$5 savings can only be used once during each monthly billing cycle.

The monthly fee schedule appears below:

<u># of Days /</u>	<u>Service</u>	<u>Credit or Debit Card</u>	<u>Bank Account Debit</u>		
<u>Week</u>					
2	AM	\$69	\$64		
2	PM	\$87	\$82		
2	AM & PM	\$156	\$151		
3	AM	\$104	\$99		
3	PM	\$130	\$125		
3	AM & PM	\$234	\$229		
4	AM	\$138	\$133		
4	PM	\$174	\$169		
4	AM & PM	\$312	\$307		
5	AM	\$173	\$168		
5	PM	\$217	\$212		
5	AM & PM	\$390	\$385		

SCHOOL DISTRICT # 102

Pritchett & Tripp

Half Days, Institute/In-Service Days & School Holiday Schedule

2013-2014

Date	Reason	Activity
Thursday, August 22	First Day of School - ½ Day – 12:00 pm*	At School
Monday, September 2	Labor Day	No Program
Thursday, September 5	No School**	Field Trip Day - TBA
Friday, October 11	Institute Day**	Field Trip Day -TBA
Monday, October 14	Columbus Day**	Field Trip Day -TBA
Friday, October 18	Half Day – 12:00 PM*	At School
Friday, November 8	Early Dismissal – 2:30 pm*	At School
Monday, November 11	Veteran's Day**	Field Trip Day - TBA
November 25, 26, 27	No School**	Field Trip Day - TBA
November 28, 29	Thanksgiving Observed	No Program
December 23	Winter Break**	Field Trip Day - TBA
December 24, 25	Christmas Observed	No Program
December 26, 27, 30	Winter Break**	Field Trip Day - TBA
December 31 January 1	New Year's Observed	No Program
January 2, 3	Winter Break**	Field Trip Day - TBA
Friday, January 10	Half Day – 12:00 pm*	At School
Monday, January 20	Martin Luther King**	Field Trip Day -TBA
Friday, February 14	Early Dismissal – 2:30 pm*	At School
Monday, February 17	President's Day**	Field Trip Day - TBA
Thursday, February 27	Half Day – 12:00PM*	At School
Friday, February 28	No School**	Field Trip Day - TBA
March 24, 25, 26, 27 & 28	Spring Break**	Field Trip Day - TBA
Thursday, April 17	Institute Day**	Field Trip Day - TBA
Friday, April 18	Good Friday**	Field Trip Day - TBA
Friday, May 23	Half Day – 12:00 pm*	At School
Monday, May 26	Memorial Day	No Program
Friday, June 6	Last Day Of School	At School
cluded in monthly tuition		,

* Included in monthly tuition ** An additional fee is required

Revised 6/25/13





Buffalo Grove Park District Clubhouse Program Phone Numbers

<u>Site (School)</u> Country Meadows	<u>Cell Pho</u> (847) 980		<u>Site Phone #</u> (847) 566-9760	
Ivy Hall	(847) 980	-5182	(847) 537-8066	
Kildeer	(847) 980	-5183	(847) 913-5882	
Kilmer	(847) 980	-5184	(847) 459-0698	
Longfellow	(847) 980	-5185	(847) 541-7538	
Prairie	(847) 980	-5186	(847) 913-0542	
Pritchett	(847) 980	-5187	(847) 459-1367	
Tripp	(847) 980	-5188	(847) 459-0697	
CLUBHOUSE OFFICE				
Melissa Lewis,	Director	B# (847)	850-2134	
Bryan Adams,	Asst. Director	B# (847)	850-2119	

Pat Dittmer, Clubhouse Office B# (847) 850-2129

Each site (school) phone number is in operation fifteen minutes prior to the start of the morning or afternoon session to the end of that session (see the Parent Handbook for specific hours). If you need to reach someone and it is not during the scheduled program hours, you will need to call the cell phone # with voicemail. If you have a question or concern that needs immediate attention, please call Melissa Lewis or Bryan Adams at any time.

Please remember to always call the cell phone number to report absences of your child