



BUFFALO
GROVE
PARK
DISTRICT



Welcome to the Clubhouse Field Trip Only 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.

Clubhouse non-participants can attend fieldtrips. Non-participants are age appropriate siblings of Clubhouse participants or those in the general school population not attending our daily Clubhouse program. In order to attend fieldtrips, non-participants need to be previously registered this school year before the fieldtrip forms are sent out.

Field Trip Only Participants will receive email notices on up coming field trips prior to the days off of school. Please provide a stable email address that you or a family member checks regularly.

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

1. Registration Form: Child's information, School, Clubhouse T-Shirt size and ADA accommodations (if necessary). As well as any special needs, medication (*see number 3), family concerns.
2. Payment: Field Trip Only program cost is \$49.00 per trip. We accept cash, check or credit card.
3. Medication Authorization Form: If medication is required during Clubhouse hours (7 a.m. – 6 p.m.) please visit our web site at http://bgparkdistrict.org/pr_clubhouse.htm to complete the Medication Authorization Form.

Sincerely,

Melissa Lewis
Clubhouse Director
(847) 850-2134
mlewis@bgparks.org

Bryan Adams
Clubhouse Assistant Director
(847) 850-2119
badams@bgparks.org



Enclosed you will find several documents that need your attention.

Forms to be completed and returned

- Clubhouse Registration Form
 - School
 - Clubhouse T-Shirt
 - ADA
 - Allergies, Special Needs, Etc
 - Medication Needed (# 2 on Registration Form), If yes, please visit online 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
- Parent Handbook – Signature Page

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 – FIELD TRIP ONLY (FTO) - 2013/2014

Child's Name: _____ Last Name: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Age: _____ Grade in 2012-13: _____ Birth Date: _____

Mother's Name: _____ Mother's Home Phone: _____

Mother's Work Phone: _____ Mother's Cell Phone: _____

Father's Name: _____ Father's Home Phone: _____

Father's Work Phone: _____ Father's Cell Phone: _____

Preferred email address (please print legibly): _____

School: _____ Country Meadows _____ Ivy Hall _____ Kildeer _____ Kilmer
 _____ Longfellow _____ Prairie _____ Pritchett _____ Tripp

1.) Please list any special needs, allergies, chronic illness, medications/dosages, or other medical information Park District staff or emergency personnel should be aware of, as well as any further information that you believe will be helpful to staff in understanding and caring for your child/ward: _____

2.) Will medication need to be given between 7 a.m. – 6 p.m.? Yes No. If yes, please complete Medication Dispensing Info. Form via website bgparks.org.

3.) Are there any custody/divorce or other family concerns that our staff should be alerted to? Yes No . If yes, please explain: (page 2 of the Clubhouse Parent's Handbook) _____

WAIVER AND RELEASE OF ALL CLAIMS

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 program(s) for which I have registered 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 participation in any of these 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 these 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 child/ward for publication in the program brochure, website and additional uses as the Park District deems necessary unless the registrant or participant expressively files with the Park District a written objection as to photos or videos of themselves and/or their child/ward.

Signature of Parent/Legal Guardian

Relationship to Child

Date

*****Notice 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)

Clubhouse T-Shirt Please
Select One:
 Youth 6-8
 Youth 10-12
 Youth 14-16
 Adult Small
 Adult Medium
 Adult Large

Note: Additional order form available online. (fee extra)

Please describe any accommodation (i.e. ADA) needed for your enjoyment of this program:



Buffalo Grove Park District
CLUBHOUSE – FIELD TRIP ONLY (FTO) - 2013/2014
EMERGENCY CONTACTS AND PICK-UP PERMISSION FORM

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 ONLY persons allowed to pick-up the participant besides the parents.** Unless court ordered documentation (*on file at the Park District*) 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 (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