



Dear Parent/Guardian,

Thank you for your interest in the Clubhouse program at the Buffalo Grove Park District. Clubhouse is a before and after school program committed to providing a safe and recreational environment for families in need of extended day care. We are thrilled to welcome you and your family to our program and are fully prepared to meet your needs.

Enclosed, you will find the registration packet, which includes all the necessary documents to complete the registration process. Please ensure that each document is filled out comprehensively. Registration forms that are submitted with missing information or signatures will not be accepted. You have the option to mail, fax, or drop off the forms at the Alcott Center, located at 530 Bernard Drive in Buffalo Grove. For security reasons, please note that we do not accept credit card or payment information via email. **Please submit your registration forms by Friday, July 5, 2024.** Forms received after this deadline will be placed on a waitlist.

To process your registration, we require the following documents:

- Registration Form
- Pick-Up Form
- Payment Agreement Form

Should you have any questions or concerns, please don't hesitate to contact us. Thank you for selecting the Clubhouse program!

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Buffalo Grove Park District Clubhouse Registration Form 2024 - 2025

Child's Name: _____ School: _____ Start Date: _____

Birth Date: _____ Age: _____ Grade: _____ Gender: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian: _____ Cell: _____ Work: _____

Parent/Guardian: _____ Cell: _____ Work: _____

Primary Email: _____ Secondary Email: _____

Alternate Local Contact: _____ Phone Number: _____

Mornings: Monday Tuesday Wednesday Thursday Friday

Afternoons: Monday Tuesday Wednesday Thursday Friday

Does your child require NWSRA inclusion assistance? Please Describe: _____

Does your child have any allergies or other medical conditions that Park District staff or emergency personnel should be aware of? Additionally, please provide any further information that you believe would be helpful for our staff in understanding and caring for your child or ward.

Will medication need to be given? No Yes - If yes, please complete Medication Dispensing Information Form at bgparks.org.

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 and events, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of said programs or events. I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s) or event(s), including transportation services, 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) or event(s), including transportation services. 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) or event(s), including transportation services. 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) or event(s), including transportation services. 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) or event(s), including transportation services. **Photo Disclaimer:** Registrants and participants of programs and special events permit the Park District to take photos and videos of themselves and/or their child/ward for publication in the program brochure, website, social media 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 child/ward.

Parent/Guardian Signature: _____ Date: _____

Parent Handbook Acknowledgement

The Clubhouse Parent Handbook can be found online at <http://bgparks.org/program/clubhouse.aspx>. I recognize and acknowledge that I have read and understand the Clubhouse Parent Handbook of the Buffalo Grove Park District. I agree to adhere and abide by the policies and procedures outlined in the handbook.

Parent/Guardian Signature: _____ Date: _____



Buffalo Grove Park District Clubhouse Pick-Up Form 2024 - 2025

Child's Name: _____ School: _____

The individuals listed below will be the **ONLY** individuals permitted to pick up the participant, apart from the parent/guardians specified on the original Clubhouse registration form, unless court-ordered documentation states otherwise.

Under no circumstances will a child be released to anyone other than those listed below, unless written permission is provided by one of the participant's parents/guardians.

Our staff will request identification from the designated person picking up your child. Therefore, please ensure that each individual listed below carries a form of photo identification with them.

1. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

2. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

3. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

4. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

5. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

6. Name: _____

Relationship To Child: _____

Cell: _____

Alternate Number: _____

Is available for pick-up within 30 minutes

Parent/Guardian Signature: _____ Date: _____

Payments:

- Payments will be deducted on the last business day of each month.
- The monthly payments for individuals are determined by their specific needs. The program offers options for attendance ranging from one to five days per week. You can choose between morning, afternoon, or both services.
- The fees listed are per child, per month. There are no discounts available for multiple siblings enrolled in the program.
- These fees are calculated based on 35 weeks of service and are divided into nine monthly payments.
- Accepted forms of payment include automatic debit from your checking or savings account, or automatic debit to your debit/charge card (MasterCard, VISA, or Discover).
- The fees cover regular school days, half-days, and early release days. However, school holidays and institute days are not included in the fees listed below and may be purchased at an additional cost.
- Any declined payments will incur a \$25 decline fee.
- Electronic Funds Transfer (EFT) payments will receive a \$5 deduction in tuition each month.

Kilmer & Longfellow			
Number of Days Per Week	AM or PM	Credit or Debit	EFT Electronic Fund Transfer
1	AM	\$48	\$43
1	PM	\$60	\$55
1	AM & PM	\$108	\$103
2	AM	\$96	\$91
2	PM	\$120	\$115
2	AM & PM	\$216	\$211
3	AM	\$144	\$139
3	PM	\$180	\$175
3	AM & PM	\$324	\$318
4	AM	\$192	\$187
4	PM	\$240	\$235
4	AM & PM	\$432	\$427
5	AM	\$240	\$235
5	PM	\$300	\$295
5	AM & PM	\$540	\$535



Buffalo Grove Park District Clubhouse Payment Agreement Form 2024 - 2025

Child's Name: _____ School: _____

Address: _____ City: _____ Zip: _____

I am responsible for the monthly tuition amount \$ _____, which will be debited in nine installments on the last business day 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.

Credit Card Automatic Payment Agreement (only select one option):

All declined payments incur a \$25 decline fee. If a parent or guardian falls behind on a child's account and fails to make payment within one week of the delinquency, the child's participation in the program will be temporarily suspended until the account is settled in full. Should a credit card payment be declined, the payment must be resubmitted using cash, a money order, a check, a cashier's check, or an alternative credit card.

If you opt to terminate your credit card automatic payment arrangement and pay the balance in full, report your credit card as lost, stolen, or compromised, update the expiration date, or wish to switch to a different credit card, you are required to complete a new Payment Agreement Form no later than five business days prior to the posting date. These forms can be obtained from the Park District office or downloaded from bgparks.org.

Credit Card Number: _____ Expiration Date: _____

Cardholder Name: _____ CVV Code: _____

I (we) give permission for the Buffalo Grove Park District to charge the amount from the account indicated, on the last business day of each month, beginning on: _____ and ending on May 31, 2025.

Credit Card Tuition Payment Authorized Signature: _____ Date: _____

Direct Debit Tuition Payment Agreement - Please Attach A Voided Blank Check

All declined payments are subject to a \$25 decline fee. Should a parent/guardian fall behind on a child's account and fail to submit payment within one week of the delinquency, the child will be temporarily removed from the program until the account is paid in full.

If you wish to switch your payment method from automatic withdrawal to credit card debit or another account, you must complete a new Payment Agreement Form at least five business days before the posting date. These forms are available both at the Park District and online at bgparks.org.

I (or we) hereby authorize the Buffalo Grove Park District to initiate debit entries to my (or our) specified checking/savings account, as indicated below, and authorize the bank named below, hereinafter referred to as the "Institution," to debit the same said account. Furthermore, I (or we) authorize the Buffalo Grove Park District to initiate credits to my (or our) account for the purpose of rectifying any errors, and I (or we) authorize the "Institution" to execute any such corrections. This authorization shall remain in full force and effect until the Buffalo Grove Park District and the "Institution" have received written notification of its termination, allowing reasonable time for action before any further withdrawals or deposits are made to the account.

Direct Debit Information: Check bank account you want your payment withdrawn from: Checking Savings

Name(s) on Bank Account: _____ Bank Account Number: _____

Bank Transit ABA (Routing Number): _____

I (we) give permission for the Buffalo Grove Park District to charge the amount from the account indicated, on the last business day of each month, beginning on: _____ and ending on May 31, 2025.

Direct Debit Tuition Payment Authorized Signature: _____ Date: _____

Due to internet security precautions, credit card and payment information are not accepted via email.



Special Event Calendar
 District 21
 Kilmer & Longfellow
 2024 - 2025

Date	Special Event
August 28, 2024	Grades 1-5 First Day Of School - Regular Program Hours
August 29, 2024	Kindergarten Group A - First Day Of School – Regular Program Hours
August 30, 2024	Kindergarten Group B - First Day Of School – Regular Program Hours
September 2, 2024	No Program - Holiday
September 27, 2024	Half Day – Program Begins At 12 pm
October 3, 2024	No School – Field Trip
October 14, 2024	No School – Field Trip
October 21, 2024	No School – Field Trip
November 5, 2024	No School – Field Trip
November 25 – November 27, 2024	No School – Field Trip(s)
November 28 – November 29, 2024	No Program – Holiday
December 23, 2024	No School – Field Trip
December 24 - December 25, 2024	No Program – Holiday(s)
December 26 – December 27, 2024	No School – Field Trip(s)
December 30, 2024	No School – Field Trip
December 31, 2024 – January 1, 2025	No Program – Holiday(s)
January 2 – January 3, 2025	No School – Field Trip(s)
January 6, 2025	No School – Field Trip
January 20, 2025	No School – Field Trip
February 14, 2025	Half Day – Program Begins At 12 pm
February 17, 2025	No School – Field Trip
March 24 – March 28, 2025	No School – Field Trip(s)
April 1, 2025	No School – Field Trip
April 18, 2025	No School – Field Trip
May 16, 2025	Half Day – Program Begins At 12 pm
May 26, 2025	No Program – Holiday
June 10, 2025	Last Day Of School

Emergency Days: Latest possible last day will be June 17, 2025; if the end of the school year is extended one day for each day missed for emergency/snow days.

School Hours	Half Day Hours
9 am – 3:30 pm	9 am – 12 pm