





Before and After School "Club" 2023-2024

The <u>Village of Island Lake Recreation Department</u> offers "Before and After School Care" at <u>Cotton Creek Elementary School</u> during the school year. The morning program runs 6:30 a.m. to 9:05 a.m. Monday through Thursday, and 6:30 a.m. to 9:30 a.m. on Fridays. The afternoon program runs from 3:40 p.m. to 6:00 p.m. A light snack is provided for the children in the afternoon part of the program.

During club hours your child will participate in a variety of activities including homework time, games, sports, and free time. We strongly encourage group activities.

To register for this program, please visit Miss Ashley at the RECREATION OFFICE located within the Island Lake Village Hall @ 3720 Greenleaf Avenue. A \$50 non-refundable registration fee will be required at the time of registration. Tuition will be discounted when you have more than one child enrolled. After your initial registration, all monthly tuition payments may be brought in when you are dropping off your children, mailed to the Village of Island Lake, dropped off at the Village Hall (the drop box is located outside the main entrance of the Village Hall) or you can pay online via E-Pay. All cash payments must be made in person. We are not responsible for cash payments that are dropped off. The following tuition schedule is based on 179 school days divided by nine months. Your tuition amount remains the same each month regardless of days off of school.

During non-attendance school days, we offer a full-day program 7:00 a.m. to 5:30 p.m. at the Village Hall. Field Trips and activities are planned for these days. An additional fee of \$50 will be required for the all-day care, this includes field trip costs. You must register in advance for these extra days. Minimum of 20 and max of 30 required to run these. **If we do not have enough participation numbers there will be no Club offered. For more information or to register for Club please call the office at 847-416-7866 or e-mail Miss Ashley

Monthly Tuition: K-5

1ST Child/2ND Child

AM \$161 / \$151

PM \$157 / \$147

BOTH \$265 / \$255

Village of Island Lake Recreation Department 3720 Greenleaf Avenue 847-416-7866/Fax: 847-526-1534

Web:

villageofislandlake@voislk.com

Discover Days Off School Program

On a quest to keep your children occupied on scheduled days off of school? Look no further! This program is for children K-5th regardless if you are registered for our Club program. We will have exciting activities that will peak all of their interests! This includes, field trips, indoor events, special guests, gym time, craft activities, and an afternoon snack. Registration is on a first come-first served basis. When the maximum is met, we will accept a waiting list. ** For trips requiring tickets we may not be able to accommodate you once we hit our maximum. Be sure to wear comfortable clothing, closed toe shoes, and bring a sack lunch.

Minimum of 20 and max of 30 required to run

More information regarding lunch and field trips to come

Any questions please contact Miss Ashley @ashley.piltz@voislk.com

Daily Fee of \$50 which includes field trips/activities

We will be offering the program on the following dates:

October 19, 2023 (Parent Conferences)

October 20, 2023 (No School)

November 6, 2023 (Institute Day)

February 15, 2024 (Parent Conferences)

February 16, 2024 (Institute Day)

February 19, 2024 (President Day)

2023-2024 "Club" Information & Agreement Form

	AM_	PM	BOTH	DROP IN
Name of Student:			_Grade: 202	23-2024
Address:	City:			Zip:
Email Address:	Sex: M or	F Date o	f Birth:	Age:
Mother's Name:	_Cell#:		Work#_	
Father's Name:	Cell#:		Work#_	
Are there custody restrictions? Y/N Is there an copy of the court order.	"Order of Pro	tection?	" <mark>Y / N</mark> If ye	s please attach a
The following information will be kept confidential. Only information: Documents are maintained in a locked under with the State of Illinois document retention schedules				
Has your child been exposed to a communicable	disease? Y/	N		
Has your child been exposed to AIDS or Hepatitis	Type B? Y/	N		
Are there any health issues we need to be aware explanation if Y.	of including (COVID?	<mark>Y / N</mark> Please	attach
Are there any known Allergies? Insect Stings	Penicillir	1	Food	Other
Does your child have any special needs? Y / N				
Does your child have any special dietary needs?	Y / N If yes p	lease atta	ach explana	ation.
Does your child currently taking medication? Y /	N If yes pleas	se attach	reason.	
List up to 3 people who are authorized to pick up authorized unless otherwise noted. Code Word_	your child. I	Mom and	Dad are as	sumed
1	Phone#			
2	Phone#			
	Phone#			
3	Phone#			

LIABILITY WAIVER

Please read this form carefully and be aware that in registering your minor child/ward for participation in the Village of Island Lake Before and After School CLUB Program, you will be waiving and releasing all claims for injuries, damages, illnesses and losses, including lost, stolen or broken electronic items and e-learning items, your child/ward might sustain arising out of the activities and any illnesses acquired during his/her time in the program.

I recognize and acknowledge that there are certain risks of physical injury and illnesses to participants in programs and I agree to assume the full risk of any such injuries, damages, illnesses or loss regardless of severity which my child/ward may sustain as a result of participating in any activities connected or associated with any such program, including but not limited to: falls, physical contact with other participants, tripping, mis-use of bats, balls and other objects, running, jumping, physical stress, inadequate warning of risks, rules, supervision or instructions by Releasees, actions or omissions by Releasees or any third party, inadequate or defective equipment and negligent actions by Village employees, agents, servants and third parties. I also understand that inherent risks are present despite reasonable rules, procedures, supervision and safety equipment.

I do hereby fully release, forever discharge and covenant not to sue the Village of Island Lake and its officers, agents, servants, and employees for any and all claims, costs, expenses, including legal fees, injuries, damages, illnesses and losses sustained by my child/ward, and arising out of, connected with, or in any way associated with the activities of any of the Village's Before and After School CLUB Program.

Parents/Legal Guardian Signature

Date

Dear Parents,

Please take a few minutes and go over these CLUB RULES. Club participants are expected to always exhibit appropriate behavior. As with any large group of children, rules must be enforced by the Village of Island Lake Club staff. We ask that you, as parents, go over this information with your child so they are aware of the consequences of unacceptable behavior. This is a list of some common unacceptable behaviors that will not be tolerated.

- ❖ Leaving a group without permission
- ❖ Abuse of School/Club equipment or environment
- Hitting, biting, or any method of physical harm
- Profanity
- ❖ Teasing
- ❖ Stealing
- Overly disruptive behavior
- Inappropriate playground behavior
- ❖ Bullying in any form

We have developed a very simple approach to behavior management and discipline. Staff will be firm and consistent and establish simple, understandable rules.

- We do not hurt ourselves
- ❖ We do not hurt others
- We do not hurt the things around us
- ❖ We always go to a staff member if there is a problem

Children will be encouraged to resolve conflicts with staff or other children by talking and no physical methods. If a child has difficulty with his/her behavior on a recurring basis, parents will be asked to meet with the Club staff and or the Village Recreation Coordinator. If the child continues to act inappropriately, is disruptive, or dangerous, the child may be removed from the program. If we find a child has physically harmed another child. The aggressor will be immediately removed and only allowed back to Club pending evaluation.

The Village of Island Lake reserves the right to immediately suspend or expel any child whose actions are seen as detrimental to the program. Each situation will be evaluated. Staff may develop additional rules as necessary.

I have read and understand the above rules for the "Before and After School Club" program.

Date

Child's Name Date

Homework Sign Up
My child
My child is to go over their spelling words every Friday with an AM staff member. Also, if needed special homework will be completed before gym/free time. I will notify a staff member if my child has a special homework assignment.
Signature of Parent or Guardian Date
Field Trip Release I hereby give my permission for my child/children
Child/Children Name To attend scheduled Field Trips while attending the 2022-2023 Village of Island Lake, "Before and After School Club Program." I hereby waive and release the Village of Island Lake, its employees and agents from any and all claims of liabilities arising from or in any way related to my child/children attending said field trips.
Signature of Parent or Guardian Date
Photo Release Permission During the school year, there will be times when your child/children will be photographed. These photos may be used for decorating our bulletin board at Club or the Village Hall, publicity purposes, and or appear in local newspapers or our Recreation Guide. We are requesting your permission to use these photographs for any of the above situations. Please check the appropriate line: I understand that my child/children may appear in photos for the above listed situations and give permission for this I do not give permission for my child/children to be PHOTOGRAPHED.
Child/Children Name Date

VILLAGE OF ISLAND LAKE PARKS & RECREATION MEDICATION PERMISSION FORM

Name			DOB			
Reason of Medication						
How is the medication take	en (Please circle all that a	ipply):				
Whole With Water	Chewed without Water	Mixed with Food after Eating				
Restrictions or important side effects (adverse reactions)						
Any other instructions:						

I give permission for my child to receive the above medication at any Village of Island Lake Parks and Recreation Department Program.

I understand it is my responsibility to give the medication directly to the program staff in the original dosage container clearly labeled with the following information: PHARMACY'S NAME, DOCTOR'S NAME, PATIENT'S NAME, TYPE OF MEDICATION, STRENGTH, and DOSAGE INSTRUCTIONS.

In all cases, the recommended dosage of any medication will not be exceeded. If after administering medication there is an adverse reaction, I give my permission to the Village of Island Lake to secure from any licensed hospital physician and/or medical personnel any treatment deemed necessary for immediate care. I agree to be responsible for payment of any and all medical services rendered.

In consideration of the Village of Island Lake administering medication to my minor child, I do hereby fully and forever release and discharge the Village of Island Lake and it officers, agents, servants and employees from any and all claims I may have as a result of the Village of Island Lake assisting in the administering of medication to my minor child.

2023-2024 CHANGE FORM CHANGES REGARDING A CLUB MEMBER

Name		Grade
NEW AUTHORIZATION PICK-UP PERSO I understand that I will inform the above CODE word with them at the time of pic Change Effects: AM / PM /BOTH	person to bring	n photo ID and must know the New Drop
Other changes to be made:		
Today's Date:	_ Effective Date:_	
Requested By: Parent's Name	Info. Taken By:	Staff Member