



Before and After School “Club” 2023-2024

“Before and After School Care” offered by the Village of Island Lake at Cotton Creek Elementary School for K-5 students on school days during the school year.

To register for the program call 847-526-7866, or register in person at the Village Hall.

- Morning (AM) Session: Mon. – Thurs. 6:30am - 9:05am; Fri. 6:30 – 9:30am
- Afternoon (PM) Session: Mon. – Fri. 3:40pm – 6:00pm
- A light snack is provided during PM; you may also pack a snack if you prefer.
- 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.
- A \$50 non-refundable registration fee will be required at the time of registration.
- Registration forms are available online or at the Village Hall.

Payments

1. Online: Go to www.villageofislandlake.com; scroll down and click on the E-Pay icon.
2. By check: Mail it, or pay at Club or the Village Hall or place it in the drop box at the entrance to the Village Hall. *Payment must include child's name, parent/s' and Club payment.*
3. Cash or credit card: Must be made in person at the Village Hall.

Monthly Tuition: Grades K-5		
\$50 non-refundable registration fee		
	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
villageofislandlake.com**

For more information, call 847-416-7866 and leave a message.

2023-2024 "Club" Information & Agreement Form

AM ___ PM ___ BOTH ___

Name of Student: _____ Grade: 2023-2024 _____

Address: _____ City: _____ Zip: _____

Email Address: _____ Sex: M or F Date of Birth: _____ Age: _____

Mother's Name: _____ Cell#: _____ Work# _____

Father's Name: _____ Cell#: _____ Work# _____

Are there custody restrictions? **Y / N** Is there an "Order of Protection?" **Y / N** If yes please attach a copy of the court order.

The following information will be kept confidential. Only staff working with your child will have access to this information: Documents are maintained in a locked underground storage area and are destroyed in accordance 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 of including COVID? **Y / N** Please attach explanation if Y.

Are there any known Allergies? Insect Stings _____ Penicillin _____ Food _____ Other _____

Does your child have any special needs? **Y / N** _____

Does your child have any special dietary needs? **Y / N** If yes please attach explanation.

Does your child currently taking medication? **Y / N** If yes please attach reason.

List up to 3 people who are authorized to pick up your child. Mom and Dad are assumed authorized unless otherwise noted. **Code Word** _____

1. _____ Phone# _____

2. _____ 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.

X

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.

Parents/Legal Guardian Signature

Date

Child's Name

Date

Homework Sign Up

My child _____ is to stay in after PM snack to do her/his homework. Please remember that we are only available to guide the students in their homework. We are not there to force them to do their homework. We will not go into a child's backpack to make sure they do or do not have homework. Since there are so many students with homework, we will not have time to sit individually with a student. Any student caught copying homework will be brought to their teacher for disciplinary action. Staff members will not be responsible for any homework that the child refuses to work on during homework time.

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 taken (Please circle all that apply):

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 its 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.

Parent/Guardian Signature

Date

