



***University Park- Parks & Recreation Department***

**Before & After School Program  
2017-2018**



Located Inside:

**Coretta Scott King Magnet School  
1009 Blackhawk Drive  
University Park, IL 60484**

Room 105

**[beforeandafterschool14@gmail.com](mailto:beforeandafterschool14@gmail.com)**

**(708) 367-4712 or (708) 921-4383**

*"This is not a District 201-U sponsored event. Any views or opinions expressed at this event are solely those of the sponsors and are not to be taken as positions, views, or opinions that are representative of District 201-U."*

*Revised July 2017*



# University Park- Parks & Recreation Department Before & After School Program

## Program Overview

The University Park-Parks and Recreation Before and After School Program, located at Coretta Scott King Magnet School in University Park, Illinois, is open to all K-5<sup>th</sup> grade students. This quality, affordable, recreational and educational program consists of age-appropriate games, sports, arts and crafts, movies, as well as homework assistance and occasional field trips during early dismissal day. The following schools are in the CM201-U School District are: Coretta Scott King Magnet School, Balmoral Elementary School, Crete Elementary School, Monee Elementary School, and Talala Elementary School.

### Days and Hours of Operation

The Before and After School Program operates Monday- Friday during days when school is in session for students. **We are closed when the schools are closed** (unless otherwise scheduled). This includes emergency school closings due to bad weather.

**Before School Hours: 7:00 a.m.-9:00 a.m. / After School Hours 3:00 p.m.-6:00 p.m.**

**Child care begins at 3:35 p.m.**

### Fees

<b>Registration Fee</b>	<b>\$25.00 (non refundable)</b>
Before School Only	\$145.00 per month
After School Only	\$175.00 per month
Before and After School	\$275.00 per month

All fees are monthly and due the 5<sup>th</sup> of every month and a \$18.00 fee will be charged for every week that the payment is late. We reserve the right to terminate child care for non-payment after the 1<sup>st</sup> week. **\*\*\*RECIPT OF PAYMENT MUST BE PRESENTED IN THE PROGRAM BY 6TH OF THE MONTH, BY EMAIL OR IN PERSON.**



### Payments

Payments can be made online at [www.university-park-il.com](http://www.university-park-il.com). **This service is provided by E-pay.** simply click online payment on the left ----miscellaneous payment---- type of activity (Before & After School Program). Please bring a copy of your receipt.

Credit Card payments must be made at Village Hall. We accept: Visa, MasterCard, and American Express & Discover. Make checks and/or money orders payable to: **The Village of University Park.** Please add Before & After School Care in your memo line.



## Before & After School Calendar for Child Care

\*trips planned on Early Dismissal Day may require an additional fee

August 23	First Day of Care
September 4	Labor Day (No School -Closed)
September 27	Early Dismissal Day
October 6	Institute Day – (No School –Closed)
October 9	Columbus Day ( No School Closed)
October 20	Early Dismissal Day
October 31	Early Dismissal Day
November 9	Parent Teacher Conferences (No School- Closed)
November 10	Veterans Day (No School Closed)
November 22-24	Thanksgiving Holiday (No School Closed)
December 22	Early Dismissal Day
December 25 -	Winter Holiday - (No School Closed)
January 8	
January 15	Martin Luther King Holiday –(No School Closed)
February 15	Early Dismissal Day
February 16	Institute Day (No School Closed)
February 19	Presidents Day
March 5	Casimir Pulaski Day – (No School Closed)
March 30	Good Friday –(No School Closed)
April 2-9	Spring Break
May 2	Early Dismissal Day
May 25	Early Dismissal Day
June 8	Early Dismissal Day
June 11	Last Day of School

There will be no child care on NO SCHOOL days and or school emergency closing (Weather)

### Additional Fees

**LATE PICKUP FEES** will be charged if a student is picked up after program operating hours. The operating hours for The Before & After School Program are:

**Before School Hours: 7:00 a.m.-9:00 a.m. / After School Hours 3:45 p.m.-6:00 p.m.** Monday through Friday. If you pick your child up after 6:00 p.m. the following fees will be imposed:

6:01 p.m.-6:15 p.m.	
6:16 p.m.-6:30 p.m.	\$18.00
6:31 p.m. - Until	\$18.00 plus \$3.00 per minute

**Phone calls to notify of late arrival will not exempt a late fee charge. Accounts will be billed.**

**Late Payment Penalty** of \$18.00 will be charged to all accounts on the 6<sup>th</sup> of the month and every Friday, as long as, the account is delinquent. **The Program may discontinue services if tuition is one week or more delinquent. All unpaid accounts or, balances left unsettled, will be sent Village Hall for collections. Students may not be able to sign up for other Park and Recreation programs without the full past due payment. This includes field trip and program activities.**

**Re-enrollment fee** of \$50.00 is charged when a child leaves the program mid-year by the parent or center and re-enrolled at any given time within the same year. If a client wishes to continue services, and if the slot is still available, the \$50.00 re-enrollment will be requested upon entering the program. If payment is not made by the 5<sup>th</sup> of the month and the child is absent for 5 days or more, the program will automatically withdraw the student from the program.



Families that voluntarily withdraw from the program upon return will be required to pay the past due balance, re-enrollment fee and the first month of child care up front.

### **Discipline Policy**

We do not use profane language or, any kind of corporal punishment (hitting, spanking, kicking, pinching etc). Children are expected to respect the program employees and each other, along with the equipment, supplies, materials and furniture.

In the event of an offence or, negative situation, the following steps will be taken:

- |               |  |
|---------------|--|
| <b>Step 1</b> | <b>The child will be spoken to and allowed to explain the situation.</b> |
| <b>Step 2</b> | <b>Time out</b>  |
| <b>Step 3</b> | <b>Privileges taken away or phone call to parent</b>                     |
| <b>Step 4</b> | <b>Write Up/ with Parent Signature</b>                                   |

After continuous offenses or if a serious offense occurs, we will document the incident/incidents and a parent meeting will be scheduled to resolve the issue/issues. If the issues persist, we will document all incidents, the parent may receive notice of termination and the child will not be allowed back into the program.

We have an “open door” policy we use discipline to maintain safety at all times and also as a teaching tool, to help children learn from mistakes while handling their emotions.

Please contact us with questions or concern.

### **Program Rules**

- Follow directions
- No use of foul, profane language, or gestures.
- No jumping around in the classroom or jumping on furniture.
- Place equipment, games and supplies in proper place after use.
- No running inside the classroom or hallways
- No yelling or screaming
- Respect other’s space, supplies, and feelings

- No name calling, bullying or teasing
- Keep hands and feet to yourself ( no hitting , kicking, pushing)
- Under no circumstance will students be allowed to re-enter classrooms at CSK to retrieve items, homework or school books.
- Please inform the program employee of any problems or issues.

## **Transportation**

Bus Transportation is provided from the program site to Balmoral Elementary, Crete Elementary, Monee Elementary and Talala Elementary School in the morning with a return trip back to the program site in the afternoon. A **Day Care Transportation Form** needs to be completed (this can only be done by the parent only). **The Day Care Transportation form needs to be completed and returned to the school district in order to establish the Transportation service.**\* Please note, If your child requires bus transportation, **Coretta Scott King Magnet School is your child’s bus stop**. The school district does not establish two different bus routes - The Before and After Care School Program is **not responsible** for making these arrangements. Parents must make alternative arrangements for the child to be transported to school. **Please submit a copy of your Day Camp Transportation form with your completed application.**

## **Registration Packet**

Please thoroughly read this registration packet.

Completely fill out and **return pages 6,7,8,9,10** to the Parks & Recreation Office or the program site. Pay the \$25.00 registration fee, along with the first month’s payment. All payments are made out to: **Village of University Park**

### **Registration Locations**

Coretta Scott King Magnet School (program site)  
 1009 Blackhawk Drive – Room 105  
 University Park, Il 60484  
**Monday-Friday 9:00 a.m. -12:00 a.m.**  
**708-367-4712**

**August- June only**

University Park Village Hall (Visa/Master Card are accepted at this location)  
 698 Burnham Drive  
 University Park, Il 60484  
**708-534-6451**

**Mon-Wed 9:00 a.m-5:00 p.m.**  
**Thurs 9:00 a.m.-12:00 p.m.**  
**Friday -closed**

University Park- Parks & Recreation Department  
Before & After School Program



**Enrollment Form**

\*Please Print Clearly

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Birthdate: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

List any Allergies: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Does your child take any medication? Yes \_\_\_\_\_ No \_\_\_\_\_ if yes, please list and explain: \_\_\_\_\_

When/How often: \_\_\_\_\_

\*\*\*\*\*

Mother's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*\*\*\*\*

Primary Contact Person (please check one)

Mother \_\_\_\_\_ Father \_\_\_\_\_ Both Parents \_\_\_\_\_ Guardian \_\_\_\_\_

University Park- Parks & Recreation Department  
Before & After School Program

**Emergency Contact Form**

In case of an emergency, we will contact the primary parent first. Please list other contacts by order of priority.

Emergency Contact #2

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Emergency Contact #3

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

\*\*\*\*\*

In the event of a medical emergency, we will contact you and/or the names listed above and your child will be taken to the nearest medical facility. I, \_\_\_\_\_ authorize the employee from the University Park- Parks and Recreations Before/ After School program to obtain medical treatment for my child, \_\_\_\_\_ in the event of a medical emergency. I am responsible for payments of services and treatments.

Medical Insurance Name: \_\_\_\_\_

Group # \_\_\_\_\_ ID/Member # \_\_\_\_\_

Person Responsible for Insurance: \_\_\_\_\_



University Park- Parks & Recreation Department  
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**Authorized Pick- Up Form**

Please list the names of people authorized to pick up your child. We may ask for identification, therefore, please inform the persons listed on this form to have their ID available.

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_



We will not release your child to anyone who is not listed on this form unless you provide us with a written note or phone call prior to pick-up.

\*Please update this list throughout the year if your information changes.



University Park- Parks & Recreation Department  
Before & After School Program

**Termination Policy**

Once the process of enrollment is complete, a written notice is required for termination of services. The registration fee is not refundable and all outstanding fees prior to the termination date must be paid in full. **We reserve the right to terminate services due to disciplinary issues and /or non-payments of fees. If we terminate services, you are responsible to pay any outstanding balances.**

\*\*\*\*\*

**Parent/ Provider Agreement 2017-2018**

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

Please check one:

Before School Only \_\_\_\_\_  
After School Only \_\_\_\_\_  
Before & After School \_\_\_\_\_

This agreement is between \_\_\_\_\_ and University Park- Parks and Recreation Department. I have read this registration packet thoroughly and understand the guidelines listed. I agree to the terms and conditions stated in this handbook. I understand that after enrollment is completed, I will give written notice of termination of childcare services. I also understand that the registration fee is non-refundable and I am obligated to pay all fees incurred prior to termination. I understand that all monthly payment are due by the 5<sup>th</sup> of each month and if the payment is made on the 6<sup>th</sup> I will be charged a \$18.00 late fee every week until paid in full. Payment is made at Village Hall, 698 Burnham Drive, University Park, IL 60484 or online at [www.university-park-il.com](http://www.university-park-il.com) Epay.

\*\*\*\*RECEIPT OF PAYMENT MUST BE PRESENTED IN THE PROGRAM BY 6<sup>TH</sup> OF THE MONTH, BY EMAIL OR IN PERSON.

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Program Manager: \_\_\_\_\_ Date: \_\_\_\_\_

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**Office Use Only**

Registration Fee Paid: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Amount Due Each Month: \_\_\_\_\_

University Park- Parks & Recreation Department  
Before & After School Program

**Photography & Internet Policy**

Sometimes our staff may take pictures during camp for local newspaper or use them for marketing and promotional materials for our department.

\_\_\_\_\_ Yes, my child can be photographed by staff for the newspaper or internet.

\_\_\_\_\_ No, I object to my child being photographed by staff for the newspaper or internet.

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Parent or Guardian's Signature

University Park- Parks & Recreation Department  
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**Application Checklist**

Student's Name \_\_\_\_\_

Students School \_\_\_\_\_

\_\_\_\_\_ Before & After School Application

\*\*\*reviewed all blanks filled in

\_\_\_\_\_ \$25.00 Registration Fee & 1<sup>st</sup> month receipt copied

\_\_\_\_\_ Day Care Transportation Form –

\*\*\* Parent responsibility to take to the District– **Keep a copy for our files**

\_\_\_\_\_ Photography waiver

\_\_\_\_\_ Medication

\*\*\* Inform parent that medication must be on site in our program on the **first day**. We do not have access to the nurse's office.

NOTES: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Application received by: \_\_\_\_\_ Date: \_\_\_\_\_

University Park- Parks & Recreation Department  
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**Withdrawal Letter**

Date: \_\_\_\_\_

Dear Before & After School Care Staff,

Please allow this letter to serve as official notice withdrawing  
\_\_\_\_\_ from the Before & After School Program. As of  
\_\_\_\_\_ (date)

Sincerely,

\_\_\_\_\_ Parent Name

\_\_\_\_\_ Parent Signature

\_\_\_\_ Before Care only

\_\_\_\_ After Care only

\_\_\_\_ Before and After Care

# University Park- Parks & Recreation Department Before & After School Program



## Parent/ Provider Agreement 2017-2018

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

Please check one:

Before School Only \_\_\_\_\_

After School Only \_\_\_\_\_

Before & After School \_\_\_\_\_

This agreement is between \_\_\_\_\_ and University Park- Parks and Recreation Department. I have read this registration packet thoroughly and understand the guidelines listed. I agree to the terms and conditions stated in this handbook. I understand that after enrollment is completed, I will give written notice of termination of childcare services. I also understand that the registration fee is non-refundable and I am obligated to pay all fees incurred prior to termination. I understand that all monthly payments are due by the 5th of each month and if the payment is made on the 6<sup>th</sup>, I will be charged a \$18.00 late fee every week until paid in full. Payment is made at Village Hall, 698 Burnham Drive, University Park, IL 60484 or online at [www.university-park-il.com](http://www.university-park-il.com)- E pay.

**\*\*\*\*RECEIPT OF PAYMENT MUST BE PRESENTED IN THE PROGRAM BY 6TH OF THE MONTH, BY EMAIL OR IN PERSON.**

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Program Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Revised July 2017