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

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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-5th 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

Registration Fee $25.00 (non refundable)
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 5th 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 1st week. ****RECEIPT 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. 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*

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

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. $18.00
- 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 6th 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 5th 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:

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

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) August- June only
1009 Blackhawk Drive – Room 105
University Park, Il 60484
Monday-Friday 9:00 a.m. -12:00 a.m.
708-367-4712

University Park Village Hall (Visa/Master Card are accepted at this location)  
698 Burnham Drive
University Park, Il 60484
Mon-Wed 9:00 a.m-5:00 p.m.
Thurs 9:00 a.m.-12:00 p.m.
Friday -closed
708-534-6451
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___________
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: _______________________________________________
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 payments are due by the 5th of each month and if the payment is made on the 6th 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- Epay.

****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:__________

*****************************************************************************

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.

_______________________________________
Parent or Guardian’s Signature
University Park - Parks & Recreation Department
Before & After School Program

Application Checklist

Student’s Name________________________________________

Students School________________________________________

_____ Before & After School Application
    ***reviewed all blanks filled in

_____ $25.00 Registration Fee & 1st 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:____________________
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 _______

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Parent/ Guardian Signature:_____________________________________
Date:____________
Program Manager:_____________________________________________
Date:____________

Revised July 2017