2024-2025

3 Year Old Preschool Registration Form

Registration Begins: Saturday, January 20, 2024

3 Year Old preschool is for children that are 3 years of age on or before September 1, 2024 and toilet independent.

Please complete both sides of this form and return with the child's birth certificate, deposit (\$175) and proof of residency for Bartlett residents.

Parent/Guardian Full Name:		Relationship to Child:			
Child's Name (Last and	First):				
Age:	Birthdate:	Gender: M F			
Address/City/Zip:					
Day Phone:		Work/Cell Phone:			
Email Address:		Current Student/Sibling of Current Student: Yes/No			
would like my child to	o attend the same time as	(name and phone)			
We will try our be	est, but cannot always accomm	date friend requests. No more than two children may be linked.			

Class minimum 15, maximum 20

Location: All classes are held at Bartlett Community Center Preschool. 700 S Bartlett Road

Class Term: September 3, 2024 through May 16, 2025

Please select your top three choices by numbering 1, 2 and 3.

Number	ID#	Day	Time
	82237-01	M/W/F	9:15-11:10am
	82237-02	Tu/Th	8:45-10:40am
	82237-03	Tu/Th	9-10:55am
	82237-04	M/W/F	9-10:55am

Fees:

2 Day Program:

Resident - \$1,684 per year - Required deposit \$175.00 - Balance \$1,509

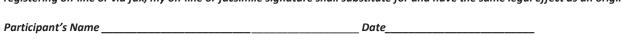
Regular - \$1,834 per year - Required deposit \$175.00 - Balance \$1,659

3 Day Program:

Resident - \$1,902 per year – Required deposit \$175.00 - Balance \$1,727

Regular - \$2,052 per year - Required deposit \$175.00 - Balance \$1,877

Special Modifications/ A.D.A Please list any medications that need to be dispensed at programs, allergies, or describe special modification needed for successful inclusion into the program. A two week notice is recommended.				
The Bartlett Park District reserves the right to photograph or videotape participants in Park District programs, facilities or parks for the District's promotional materials.				
Registration Waiver & Release				
The Bartlett Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Bartlett Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the below listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.				
You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.				
WARNING OF RISK				
Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Bartlett Park District to guarantee absolute safety.				
WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK				
Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with these programs (including transportation services and vehicle operations, when provided).				
I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Bartlett Park District, including its officials, agents, volunteers and employees.				
I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If				



Participant's Signature (18 years or older or Parent/Guardian)
Signature is required for participation.



Payment Options

Please complete this registration form and return to the Registration Counter.

The following documents are required to complete the registration process: __Copy of current utility bill attached as proof of residency. Child's certified birth certificate or passport must be brought in as proof of age. Non-certified birth certificates, Hospital or Baptismal certificates cannot be accepted. _Voided check. (For Option #1 or #2 only) Submit the deposit as listed on the Registration Form. Deposits are deducted from the listed class fees. Please initial to select your payment option: Payment Option #1. I wish and agree to pay the balance in full by, plus a \$3 processing fee, in one EFT (Electronic Funds Transfer) payment to be processed on June 16. Payment may be set up with a voided check, which needs to be submitted with this application, or charged to your credit card number listed below. Payment Option #2. I wish and agree to pay the balance in equal payments, plus the \$3 per month processing fee, by EFT (Electronic Funds Transfer) processed on the 16th of the months of June through March. A voided check must be submitted with this application form. Payment Option #3. I wish and agree to pay the balance in equal payments, plus the \$3 per month processing fee. I agree to allow my credit card account to be automatically charged each month for the Bartlett Park District Preschool Program. My credit card will be charged on or about the 16th day, starting the month of June through March. Only fill out credit card information if choosing Payment Option #1 or 3 Account Holder's Name: Date:_____ Credit Card Number: Exp. Date: CID: A \$25 fee is charged for each bank refused payment or credit card decline. Initial I understand that I am responsible for updating payment information if I change banks, or credit card is lost/stolen/expired. A \$25 service fee will be charged if payment information isn't updated by the 15th of the month. I have read, and fully understand the terms and agreement to all in full.

Please see next page for deposit payment options & Preschool Cancellation Policy

Date:

Signature:

Deposit Options and Cancellation Policy

Deposit = \$175.00			
I am submitting my deposit by:CASH	CHECK CREDIT CA	RD	
Account Holder's Name:		Date:	
Credit Card Number:	Exp. Date:	CID:	
Presch	ool Cancellation Policy		
 Once placed into class, all deposits are enrollment elsewhere. Refund requests must be submitted in first working day received. The program Cancellation requests received July 15 in processing fee is withheld. There is no refunded, credit or transferate in the Bartlett Park District reserves the management of the program begins, if a replacement withheld and an administration fee is a issued. I have read in full, understand and agree to the program of the progra	writing to the Registration Officen cancellation form is available in through September 6, the total wrable funds available after September to review and make final depend is found and registered, a palso withheld. If no replacement	e and are calculated as of the in person or online. deposit, plus \$100, plus a \$5 tember 6. ecisions on all refund requests. Fortion of the total cost is a sis found, no refund will be	
Signature	Date		
Office Use: Date ReceivedProof of Residency submitted Certified Birth Certificate or Page	ssport submitted		
Payment:			
Deposit submittedVoided check attached for paynAll fields completed for paymen	·		
Staff Initials			