

2024-2025
Young 3's Preschool Registration Form

Registration Begins: Saturday, January 20, 2024

Young 3's Preschool is for children that turn 3 years of age after September 1, 2024 up to January 30, 2025 and are 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

I would like my child to attend the same time as (name and phone) _____

We will try our best, but cannot always accommodate 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: October 15, 2024 through May 16, 2025

ID#	Day	Time	Deposit	Fee Res/Reg
82215-01	Tu/Th	9:30-11am	\$175	\$*834/984

*Children can begin class when they turn 3 and are toilet independent. Please see proration chart for fees.

Requested Start Date _____

Special Modifications/ A.D.A

Please list any medications that need to be dispensed at programs, allergies, or describe special modifications 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.

Young 3's Proration Chart

Resident Rates-

Week	Start Date	Resident Fee	Deposit	Balance
28	October 15, 2024	\$834.00	\$175	\$659.00
27	October 22, 2024	\$804.21	\$175	\$629.21
26	October 29, 2024	\$774.42	\$175	\$599.42
25	November 5, 2024	\$744.63	\$175	\$569.63
24	November 12, 2024	\$714.84	\$175	\$539.84
23	November 19, 2024	\$685.05	\$175	\$510.05
22	November 26, 2024	\$655.26	\$175	\$480.26
21	December 3, 2024	\$625.47	\$175	\$450.47
20	December 10, 2024	\$595.68	\$175	\$420.68
19	December 17, 2024	\$565.89	\$175	\$390.89
18	January 7, 2025	\$536.10	\$175	\$361.10

Regular Rates-

Week	Start Date	Resident Fee	Deposit	Balance
28	October 15, 2024	\$984.00	\$175	\$809.00
27	October 22, 2024	\$948.86	\$175	\$773.86
26	October 29, 2024	\$913.72	\$175	\$738.72
25	November 5, 2024	\$878.58	\$175	\$703.58
24	November 12, 2024	\$843.44	\$175	\$668.44
23	November 19, 2024	\$808.30	\$175	\$633.30
22	November 26, 2024	\$773.16	\$175	\$598.16
21	December 3, 2024	\$738.02	\$175	\$563.02
20	December 10, 2024	\$702.88	\$175	\$527.88
19	December 17, 2024	\$667.74	\$175	\$492.74
18	January 7, 2025	\$632.60	\$175	\$457.60

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 registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name _____ **Date** _____

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. Driver’s license cannot be accepted.

_____ 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 preferred payment option:

_____ **Payment Option #1.** I wish and agree to pay the balance in full, plus a \$3 processing fee, in one EFT (Electronic Funds Transfer) payment to be processed on the 16th of the month prior to start date. 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 August thru 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 August 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:** _____

Initial _____ 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 15h of the month.

I have read, and fully understand the terms and agreement to all in full.

Signature: _____ **Date:** _____

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

Preschool at Bartlett Community Center, 700 S. Bartlett Road, Bartlett, IL 60103
www.bartlettparks.org phone: 630-540-4853 fax: 630-540-4869

Deposit Options and Cancellation Policy

Deposit: \$175.00

I am submitting my deposit by: _____ CASH _____ CHECK _____ CREDIT CARD

Account Holder's Name: _____ Date: _____

Credit Card Number: _____ Exp. Date: _____ CID: _____

Preschool Cancellation Policy

- **Once placed into class, all deposits are non-refundable and non-transferable for any reason including enrollment elsewhere.**
- Refund requests must be submitted in writing to the Registration Office and are calculated as of the first working day received. The program cancellation form is available in person or online.
- Cancellation requests received **up to one month prior to start date, the total deposit, plus \$100, plus a \$5 processing fee is withheld.**
- **There is no refund, credit or transferable funds available once beginning the program.**
- The Bartlett Park District reserves the right to review and make final decisions on all refund requests.
- Once the program begins, if a replacement is found and registered, a portion of the total cost is withheld and an administration fee is also withheld. If no replacement is found, no refund will be issued.

I have read in full, understand and agree to the above Preschool Cancellation Request Policy.

Signature _____

Date _____

Office Use:

_____ Date Received _____

_____ Proof of Residency submitted

_____ Certified Birth Certificate or Passport submitted

Payment:

_____ Deposit submitted

_____ Voided check attached for payment option #1 or #2

_____ All fields completed for payment option #1 or #3

Staff Initials _____