

Registration Form
Winfield 34: After School Care Program
Year: 2024-2025

General Information

The After School Program is set up to give extended care to District 34 students. Children will be involved in a variety of supervised indoor/outdoor activities. The program begins on the first full day of school in August and follows the same schedule as the school calendar.

- The Park District offers a weekly care program. Payment for each child must be made bi-weekly, in advance. Parents will be charged this fee even if the student is not in attendance.
- The After School Program will not be held when school is not in session or early release days.
- **The First two weeks of your child(rens)'s attendance will be due at the initial registration.**
- **Before Care: not currently being offered. We will take a waitlist, and we need a minimum of 6 participants to register for all 5 days for the full semester. To be added to the waitlist email Becca @rebeccal@winfieldparkdistrict.com.**

After School Care: Winfield Primary School Gymnasium

5 days (\$80), 4 days (\$68), 3 days (\$60) 2 Days (\$42), 1 Day (\$23) per child, per week.

- Hours are from 3:15-6:00 P.M.
- Parents must call or text (630)-470-1583 before 3:15 P.M. if the child will be absent from the After School Program.
- Students must be picked up by 6:00 P.M. or a late fee will be added.
 - **1-5 Minutes late=\$10.00 per child**
 - **6-30 Minutes late=additional \$15.00 per child**
 - **Child Information:**

CHILD'S NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ GRADE: _____ TEACHER: _____

BIRTHDATE: _____ AGE: _____

Parent/Guardian Information:

PARENT/GUARDIAN NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ EMAIL: _____

HOME: _____ CELL: _____ WORKPHONE: _____

PARENT/GUARDIAN NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ EMAIL: _____

HOME: _____ CELL: _____ WORKPHONE: _____

Special Needs or Requests: _____

AFTER CARE SCHEDULE FOR 2024-2025 SCHOOL YEAR:

M T W TH F Varies _____

Payment is due at registration: (CHECKS PAYABLE TO Winfield Park District)

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY:

Registration Date: _____ Processed by: _____

- Cash ○ Charge ○ Check # _____