Watseka Park District

Mission: To open the door for recreational and social opportunities for residents of all ages and abilities in Watseka and surrounding communities.

110 South Third Street Watseka, IL 60970 Phone: 815-432-3931

Fax: 815-432-2762

Dear Parent/Guardian:

I am enclosing the paperwork for our after-school program for 2021-2022. We are looking forward to a year that hopefully gets us back to the normal that we used to know.

Please find the paperwork that is needed to enroll your child in the afterschool program. Please fill it out and return it to me as soon as possible if you would like your child to be enrolled in our program for the upcoming school year.

I will send out more details and dates as soon as we are sure of them. If you have questions in the meantime, please feel free to call the office or email me (<u>watsekaparks@att.net</u>). We will let you know about our restrictions with masks, social distancing, etc. as soon as we know what the State of IL is requiring for the upcoming school year.

The cost of the after-school program will be increased. We have not had an increase in 3 years but due to all our extenuating circumstances we could not go another year without an increase. The fees for this year for an entire week will be \$40 per child. The fees for 3-days per week will be \$20. The fees for 1-day per week will be \$9.

We will be accepting the children when they get out of school each day as usual. We will also take the children on their early dismissal day at 1:00 p.m. on Wednesdays. We will accept children early in the event of an UNPLANNED early dismissal due to weather or something unforeseen. We

will NOT accept children on planned early out days or days without school as listed on the school calendar.

Again, please return your paperwork as soon as possible if your child will be attending the after-school program to be sure to reserve your spot. Have a great summer and we will see you in the Fall!

Sincerely,

Sherry Johnson

Registration Form Watseka Park District ASPA Program 110 South Third Watseka, IL 60970 815-432-3931

Parent's/Guardian's Name	::
Address:	
Home Phone:	Work Phone:
E-mail address:	Child's Birthday:
Cell Phone:	Other Phone:
Child's Name:	Grade:
Child's Name:	Grade:
Schedule: Please check the	e days your child/children will be attending.
Monday Tuesday	WednesdayThursday Friday
You must notify the Watse	ka Park District in writing if your schedule changes.
The following people have	e my permission to pick up my child/children:
Name:	Phone:
Name:	Phone:
Child's medical condition	(s):
Treatment to be used by the	ne Watseka Park District for the above condition(s):
Child's non-food allergies	3:

Any other information that we should	be aware of (please be specific):
	lren can be picked up by the persons listed in cas icking up your child/children, please contact the
	cannot follow the rules and is/are disrupting the tuition on time, then my child/children will no ASPA Program.
I further understand that I am respons District/ASPA Program to initiate leg	ible for any costs incurred by the Watseka Park al services for payment issues.
Parent's/Guardian's Signature	 Date

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Bus Permission Slip for After School Program

My child,	, will be attending the		
Watseka Park District After School F year. My child will attend the after-s week on (list days)	Program during the 2021-2022 school school program days per		
I give my permission for my child to ride the bus to the Watseka Park District, located at 110 South Third Street in Watseka for the program.			
I agree to notify both agencies of any immediately.	changes in transportation		
Parent/Guardian Signature	Date		
Transportation Supervisor	Date		
ASPA Coordinator	 Date		