

M.A.K.E.-I.T.

School Year Registration Forms
2023-2024

Effective August 11, 2023



INSTRUCTIONS:

Please keep colored forms (pgs. 1-7) for your information.

White forms (pgs. 8-12) should be filled out and returned to M.A.K.E.- I.T.

A copy of your contract will be given to you.

How to Register for M.A.K.E.-I.T. 2023-24

Section 1: Colored pages (1-7) are information for you to keep.

- ✓ **Page 1:** Instructions
- ✓ **Page 2:** How to Register
- ✓ **Page 3:** Program Information
- ✓ **Page 4:** Contact Information
- ✓ **Page 5:** Tuition and Fees
- ✓ **Page 6:** Community Connection Point (tuition assistance) is available to eligible families from the State of Illinois to help working parents/guardians pay fees.
- ✓ **Page 7:** Safety policy

Section 2: White pages (8-12) are to be filled out and returned to M.A.K.E.-I.T.

- ✓ **Pages 8-9:** Personal Information
 - Completely fill out registration paperwork.
 - If you have been with us before, please edit each child's info page, including grade and age. Please check emergency phone numbers and make any corrections that need to be updated. You will also need to re-sign the permission forms.
 - **The family registration fee is due when forms are turned in.**
- ✓ **Page 10:** Permission slips/release form
- ✓ **Page 11:** Fusion waiver
- ✓ **Page 12:** Contract agreement. Tuition is due each Friday.

To Enroll your Child, you must do the following:

1. Complete and Sign contract, pg. 12, which we will copy and return to you.
2. **Pay the \$75 nonrefundable fee, which covers the full year.** If you choose to pay per session (1st semester, 2nd semester, summer) you can pay \$30 per session.
3. **Pay the first week's fee by August 11th and have no current balance.**
4. Complete Enrollment Forms, pgs. 6-11.

Fun with M.A.K.E.-I.T.

2023-2024 Registration Packet

Effective August 11, 2023

Welcome to the M.A.K.E.-I.T. Before and After School family! We look forward to a long and happy relationship with your family. The following policies have been created to ensure the smooth operation of the center and safety of all children in the program. First day of M.A.K.E.-I.T. is the first day of school. All programs take place at Madison Park. Shuttle buses are available from Litchfield Elementary, before and after school.

Before School:

1. We open at 6 a.m.
2. Families may choose how many days a week.
3. Students will be dismissed/shuttled to their appropriate school.

After School:

1. From school dismissal time until 6:00 p.m.
2. Families may choose how many days a week.
3. Students will be shuttled here after school from their building if they are not at Madison Park already.

Early Dismissal days:

1. When dismissed at 1:15 PM, we may have a special activity or a field trip.
2. When dismissed at 11:15 am, lunch will be served. There will be a special activity or field trip planned.

Drop In:

Drop Ins must have prior approval. You must pay the \$30 session activity fee. (see Director for the payment plan.) Fees must be paid prior to attendance.

Fees are: Before School is \$18.50 per day and After School is \$20.00 per day .

Early Dismissal fees will be added as needed.

Summer:

We offer an all day long, summer program for most of the summer.

M.A.K.E.-I.T. contact information:

Kelley Walker, Director

Office Phone: 217-324-5217



Office hours vary. The Remind App or Email are the easiest forms of communication.

Email: kwalker@litchfieldpanthers.org

Feel free to email at any time.

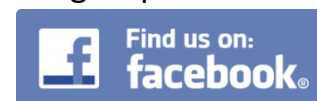
Cell phone: for drop off and pick up as well as emergencies. Please text 217-716-0192.

Remind app: <https://www.remind.com/join/ek6c3g>



If you haven't already, please download the Remind App and connect to M.A.K.E.-I.T. at the above link. This is what we use during times when we are with the kids and don't have phone or email access, in the case of an emergency, or when we need to send an announcement. If you need help, just ask, we can show you how to do it. This is a great form of communication for the group.

Facebook: <https://www.facebook.com/makeit.childcare.3>



Join us on Facebook to see what we have done and what we plan to do.



Our calendar follows the school calendar. We are closed any day that school is not in session due to a holiday, Covid-19 closure, institute, weather, or an emergency. M.A.K.E.-I.T. will be open on days there is a scheduled Early Dismissal. In case of an emergency or weather closing, we will notify you if M.A.K.E.-I.T. will be open or not.

Tuition and Fees:

Your weekly fee is determined by your contract, and stays the same with no deductions for absences, holidays, snow days, etc. Additional day, Early Dismissal, and field trip fees will be added. You will be contracted for 39 weekly payments OR until the school year is complete, whichever comes first. Payments are due the Friday prior to each week. If closed on Friday, they are due the last business day of the week.

Contract changes: A 2-week notice is required for changes in your child(ren)'s schedule. *Tuition will be reduced 2 weeks after the Director has approved.

Fees are:

- **Contracted Families:** \$75 Registration Fee for all 3 sessions (full year) or you can pay \$30 each session (1st semester, 2nd semester, Summer)
 - \$15 Before School
 - \$16.50 After School (when we dismiss at 3:00 PM)
 - Early Dismissal:**
 - @ 1:15 PM (when dismissal time is 1:15, the daily fee will be \$19.50)
 - @ 11:15 PM (includes a free lunch) (fee will be \$24)
 - Field Trip Fees Vary
 - \$10 Late Pick Up Fee
 - \$10 Late Payment Fee per week
- **Multiple Children Discount:**
Families who are full time (5 days a week) will get a 10% discount.
- **Staff Discount:**
\$7.50 per hour, not to exceed the regular fees. Fees will be subject to change.
- **Drop In:** Your child must be registered and have prior approval before attending.
 - Before School, \$18.50 per day
 - After School, \$20.00 per day
 - Early Dismissal:**
 - @1:15, \$24.00
 - @11:15, \$29.50, lunch included

Community Connection Point (CCP): We accept families who receive help through Community Connection Point. Below are the income guidelines that help determine eligibility for a new applicant.

Family Income Levels Effective July 1, 2022			
	New Application	Rede-termination	Over Income
Family Size	225% FPL	275% FPL	85% SMI
2	\$3,433	\$4,196.00	\$4,921.00
3	\$4,318	\$5,278.00	\$6,079.00
4	\$5,203	\$6,359.00	\$7,237.00
5	\$6,088	\$7,441.00	\$8,395.00
6	\$6,973	\$8,523.00	\$9,553.00
7	\$7,858	\$9,604.00	\$9,770.00
8	\$8,743	\$9,987.00	\$9,987.00
9	\$9,628	\$10,204.00	\$10,204.00

CCP is a state agency that helps pay childcare fees for families who are working or going to school. The program is based on income and family size. The State of Illinois has raised Income guidelines so that more families will qualify. If your family meets the guidelines, you simply pay a co-pay for each month and the State of Illinois pays the rest. For information, call 1-800-2805 or go to info@4childcare.org. Applications are available in our office. Families are responsible for paying fees until approved.

CCP co-pay is due the last business day of the month, where applicable. Field trip fees are NOT paid by CCP.

Weekly payments are due on the Friday prior to each week of attendance. A late fee of **\$10.00** will be added to your account if payment is not paid on time. CCP co-pay is due the last business day of the month. **Any balances from previous year(s) must be paid before your child(ren) can start our program again.** We do not offer any type of charge accounts.

M.A.K.E.-I.T. will be open on regular scheduled school days during the school year. **If the school closes for inclement weather, M.A.K.E.-I.T. will be CLOSED as well.** Should it become necessary to close early to due to severe weather or any other unsafe conditions, it will be your responsibility to arrange for your child(ren)'s early pick up. In any event, there will be no tuition credit for anytime the program is closed.

Late Pick Up is not a normal program option and will only be considered an exceptional occurrence. Please allow enough time at the end of the day to arrive at the center, pick up your child(ren) and leave by closing time. A late Pick Up fee of \$10.00 per child is payable for each time your family remains in the center after closing.

A \$35.00 fee will be charged for a check returned for insufficient funds. If this occurs, M.A.K.E.-I.T. will then have the option to refuse any future checks. Full cost of any collection agency fees (typically 40%) will be paid by the family and not the program.

Please direct questions to: Kelley Walker @ 217-324-5217 or email kwalker@litchfieldpanthers.org

Applications may be mailed to: 800 N. Chestnut Street, Litchfield, IL 62056, brought to the M.A.K.E.-I.T. Office at Madison Park or given to the Madison Park secretary.

Safety Information

We will release your child(ren) only to you or those persons you have listed on the information sheet. Emergencies may prevent you from picking up your child (ren); therefore, those individuals who you would authorize to pick your child (ren) should be listed in such an event. Your child(ren) will not be released without prior written authorization.

We cannot legally deny access to either parent/guardian unless there is an active restraining order on file or specific schedule for court ordered visitation rights. If the situation is unclear, we request that the family go back to the court to resolve their differences.

M.A.K.E. – I.T.
 2023-2024 School Year Program
 800 N. Chestnut (Madison Park School)
 Litchfield, IL 62056 217-324-5217
 August 11, 2023

Please include registration fee of \$75.00 per family for the year, or \$30 per session. (1st semester, 2nd semester, Summer)

Registration fee due when paperwork is turned in. 1st weeks fee is due Aug. 11th.

PART I. CHILD'S INFORMATION (may list multiple children)

Name:	Gender:
Grade Level Entering:	Teacher:
Date of Birth:	Age:

Part II. PARENT/GUARDIAN INFORMATION-Custodial

Parent/Guardian 1:	Relation to child:	
Home Address:		
Primary Email Address:		
Employer:	Address:	
Cell Phone:	Work Phone:	
Parent/Guardian 2:	Relation to child:	
Home Address:		
Email Address:		
Employer:	Address:	
Cell Phone:	Work Phone:	

Part II. PARENT/GUARDIAN INFORMATION- Non-custodial

Parent/Guardian 1:	Relation to child:	
Home Address:		
Primary Email Address:		
Employer:	Address:	
Cell Phone:	Work Phone:	
Parent/Guardian 2:	Relation to child:	
Home Address:		
Email Address:		
Employer:	Address:	
Cell Phone:	Work Phone:	

Part III. EMERGENCY CONTACT INFORMATION *(Must be a local individual **other** than parent.)*

Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	

Part IV. AUTHORIZED PICK-UP PEOPLE *(Must have **photo ID** present during pick up.)*

A. Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	
B. Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	
C. Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	
D. Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	
E. Name:			Relation:		
Address:					
Home Phone:		Work Phone:		Cell Phone:	

Part V. SCHEDULE AND TUITION AGREEMENT (cost remains the same each week regardless of attendance)
Who is responsible for payment each week? <i>Families who default on their contract are not eligible to return.</i>
What is the starting date for your children?
What time will they arrive if they are coming in the morning?
How would you like to receive information and billing from us? Paper or email (Please circle)
<i>M.A.K.E.-I.T. does reserve the right to decline services if we feel that we cannot meet your child's needs in our program. A notice of 7 days will be issued to allow parents/guardians to find alternative care.</i>

PART VI. MEDICAL INFORMATION	
Physician:	Phone:
Health Insurance Carrier:	Policy Number:
Special Health Information (allergies, special diet, etc.):	
Medical Diagnoses (example ADHD; ODD; Asthma, etc)	
Treatment Plan/Special Accommodations required (if any):	

PART VII. PERMISSION		
Field Trip Permission: I/we give my child(ren) permission to attend any field trips associated with M.A.K.E.-I.T. program; this includes, but is not limited to, attending lunch at the Baptist Church. Transportation will be busing provided by the Litchfield Community Unit School District #12 Transportation Department or M.A.K.E.-I.T. employees may drive school vans.		
Consent/Release: I/we, hereby release and discharge Litchfield Community Unit School District #12, M.A.K.E.-I.T., it's board members, partner, administrators, and agents from all claims present and future, known or unknown arising in any manner of the participation of our child(ren) in any activity sponsored by M.A.K.E.-I.T.		
Medical Care: Consent granted by parent for: Emergency medical care and minor first aid procedures. The responsibility for all medical fees is mine. With my signature, I do acknowledge my understanding of the above application and do give my consent.		
Photographs: I/we also give permission for my child(ren) to be photographed, videotaped, and/or audio recorded. I/we allow the M.A.K.E.-I.T. program to release all such pictures and/or recordings for publicity and educational purposes only to promote the Litchfield Community Unit School District #12 and M.A.K.E.-I.T. program.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Late Pick-up Policy: Our buildings close for the evening at 6:00 p.m. All children must be picked up on time. If a child remains at the center after closing time, we will do the following: call the parent/guardian phone number for a response. If no answer at the parent/guardian numbers, we proceed to call emergency contacts explaining that no one has picked up the child(ren) and ask if they would be available. If we cannot reach the parent/guardian or emergency contacts by 6:15 p.m., we will notify the police department. A late fee of \$10.00 per child will be due with the next tuition payment. Chronic late pick up may result in your child(ren)'s removal from the program.		

I agree to the above: field trip, release, medical care, photograph, & late pick-up statements.

Parent Signature _____ **Date:** _____



Waiver & Release/Signature of Consent/Parent & Guardian Waiver

You (each member, guest, or participant) agree that if you engage in any physical exercise or activity, or use any Fusion Fitness • Aquatics amenity on the premises or off premises including any sponsored club event, you do so **entirely at your own risk**. You agree that you are voluntarily participating in these activities and use of these facilities and premises and **assume all risks** of injury, illness, or death. You agree to always follow the advice of your physician concerning any and all aspects of your health. We are also not responsible for any loss of your personal property. You acknowledge that you have carefully read this "waiver and release" and fully understand that it is a release of liability. You expressly agree to indemnify and hold harmless Fusion Fitness • Aquatics, and its affiliates, employees, agents, representatives, successors, or assigns, from any and all claims or causes of action, and you agree to voluntarily give up or waive any right to bring a legal action against Fusion Fitness • Aquatics or its affiliates for negligence, personal injury, or property loss or damage.

If an individual breaks any of Fusions policies, exhibits inappropriate behavior that could possibly endanger themselves, members, or staff, or disregards authority from any staff member, they will be instructed to leave the premises immediately. When deemed appropriate, the facility may also bring the matter to the attention of the proper law enforcement.

Note: Should any part of this agreement be found by a court of law to be against public policy or in violation of any state statute or case precedence, then the remainder of this document will remain in full force.

Signature of Consent

I have read the rules and regulations pertaining to my use of Fusion Fitness • Aquatics. I, all individuals listed on the membership, and any guest I bring will comply with these requirements, as well as all other posted rules and regulations, with the understanding that if I do not, my membership privileges, guest privileges, and any membership dues paid will be forfeited.

Parent & Guardian Waiver

You agree that you are aware that the child/children named below will be engaging in physical exercise involving various sports, events, aquatic activities, and general fitness training which could cause injury to him/her. You understand that the child is voluntarily participating in these activities and assume all risk of injury that may result from engaging in any exercise program or sports related event including tripping, slipping or falling on or off the club premises. You hereby offer to waive any claims or rights that you might otherwise have to sue the club, or employees, owners, officers, or agents for any injury that might occur.

Signature _____ Date _____

Print Name _____

Child's Name/s _____

Parent Contract

(Effective August 11, 2023)

We ask families to contract for the school year, 39 weeks. Choose your attendance pattern and then pay the same amount weekly regardless of attendance or days off. This calendar takes into account holidays, teachers institute, snow days, etc. The only additional fees would be for any Early Dismissals attended or field trip fees, if any. Your first payment will be due when you register. Once you have made 39 payments you owe no more weekly fees. All fees are subject to change without notice.

Morning: \$15.00 per day (open at 6 am)

Afterschool: \$16.50 per day (2:45 PM dismissal)

Early Dismissal days: 1:15 PM dismissal (\$19.50 per day)

11:15 AM dismissal, includes a free lunch (\$24.00 per day)

Drop Ins: \$18.50 Before School, \$20.00 After School, Early Dismissal fees applied as needed.

For weekly schedules, please list child(ren) and schedule. If you know they will come specific days, circle those days. If you only know the number of days per week (example, 3 days per week), but don't know specific days, write that. For a schedule that changes, please see the Director.

(Please include name, grade, and Teacher's name)

Before School

After School

Child One: Name _____

M T W TH F

M T W TH F

Grade _____ Teacher _____

Child Two _____

M T W TH F

M T W TH F

Grade _____ Teacher _____

Child Three _____

M T W TH F

M T W TH F

Grade _____ Teacher _____

Based on the above schedule your weekly fee is \$ _____

Paper bill or email? _____ Who is responsible for the weekly fee? _____

***\$75.00 registration fee is due at the time of sign up, or \$30.00 at the beginning of each session. Weekly fees are due on the Friday prior to each week. Please pay each Friday to avoid late fee charges. First Weeks fees are due August 12th.**

Parent/Guardian Signature: _____ Printed Name: _____

Date: _____