



## 2020-2021 After the Bell (K-4th Grade)

### Information Form

Please register your child and pay the appropriate fee using a Program Registration Form, then complete **one Information Form for each child enrolled** in After the Bell. Return this form and any additional forms the front desk at the Arrowhead Community Center no later than one week prior to your start date. **This form must be completed in order for your child to participate.**

#### General Information

Child's Name \_\_\_\_\_ Gender \_\_\_\_\_  
Street Address \_\_\_\_\_ City/Zip \_\_\_\_\_  
Birth Date \_\_\_\_\_ Grade for '20-'21 \_\_\_\_\_

#### Parent/Guardian Information *Are both parents/guardians authorized to pick up child? YES/NO*

Parent/Guardian \_\_\_\_\_ Parent/Guardian \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Email \_\_\_\_\_ Email \_\_\_\_\_

*\* Emails will be our main form of communication, please make sure to put an email down to stay updated.*

#### Authorized Pick Up *List those who are authorized to pick up your child. Children may only leave with those listed on this form.*

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_  
Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_  
Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_



**Additional Information**

**About Your Child**

Please provide any information that you believe will make your child more comfortable at our After School Program. Please include any special interests, activities, games, etc.

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- **Will our staff be required to administer medication to your child? YES/NO**

If yes, a **Permission to Dispense Medication Form** must be completed.

- **Does your child have any allergies? YES/NO**

If yes, please explain.

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- **Has your child been diagnosed with autism, ADD/ADHD or any other medical condition? This information will help ensure a successful school year for your child.**

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- **Does your child have an IEP/BMP at school? YES/NO**

If yes, please explain and attach a copy of plan.

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- **Does your child require any special accommodations? YES/NO**

If yes, please explain and attach any written documentation regarding the accommodation.

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*The Behavior Contract and Parent Code of Conduct forms need to be filled out before the child's first day. They can be found on the Channahon Park District webpage in the After School Parent Handbook.*

*If you have any additional questions, please call the  
Program Supervisor– Paulina Tredennick at 815-521-3111 or  
email at [ptredennick@channahonpark.org](mailto:ptredennick@channahonpark.org)*