



ROSELLE PARK DISTRICT

555 W Bryn Mawr Ave Roselle, IL 60172 630-894-4200 rparks.org



Wildcat Care: Program Information – Registration begins 11/20 at 12:00pm

Please register in advance, all registrations must be complete by 11/29.

The Waterbury Wildcat Care Program is a cooperative effort between the Roselle Park District and partnering school district, Keeneyville School District #20 conducted at Waterbury School for the entire 2020-2021 school year.

The childcare program operates daily from 8:30am until 3:00pm. All participants are required to be registered for each day they are in attendance. Each participant must bring their own e-learning devices, chargers, and headphones. Each participant must also bring their own lunch, snack, water and wear a facial covering for the duration of the program unless outside and able to stay socially distant.

The program will allow for each student to have their remote classroom time, as well as any independent e-learning time and staff will monitor participation of students during their remote and e-learning activities. The program is designed to help promote and engage participants in learning as well as a mix of fitness, socialization, and fun!

Participants must be able to follow Waterbury's e-learning requirements to participate in the Waterbury Wildcat Care Program. Park District staff will help keep participants engaged while e-learning and facilitate activities during breaks, provide lunch time, and snack time. Park District staff will not be considered teachers, teacher's aides, or tutors.

Note: The Roselle Park District continues working with the Western DuPage Special Recreation Association (WDSRA) to provide inclusion services for our recreation programming. We are committed to building a community that fosters diversity and inclusion for recreational opportunities. Wildcat Care is not an educational program, and therefore is unable to meet the educational support required by IEP's and 504 plans. Please contact your school district in regard to all IEP and 504 plan requirements.

Participant Expectations

1. Participants must be able to wear a face mask at all times and during the following times:
 - a. Arrival/Departure
 - b. Hallways/Restrooms
 - c. Inside all program spaces
 - d. Outside when social distancing is not possible
2. Participants must be able to abide by the 6-foot social distancing guidelines
 - a. In order to maintain 6-foot social distancing guidelines, participants must be able to do the following:
 - i. Secure their own face masks or cloth face coverings
 - ii. Be fully potty-trained and require no assistance in the restroom
 - iii. Zip jackets or hoodies without assistance
 - iv. Tie shoes without assistance
3. Participants will need to bring the following items to the childcare program every day:
 - a. E-learning devices, chargers, and headphones
 - b. Required materials needed to participate in e-learning (textbooks, notebooks, writing materials, etc.)
 - c. Sack lunch and snack
 - d. Water bottles (enough water for the duration of the program)
 - e. Face mask or cloth face covering
 - f. Long sleeve clothing item (hoodie, sweatshirt, jacket, etc.)
 - g. Personal hand sanitizer (optional)

For questions please contact Recreation Manager, Dana Colantuono, at 630-894-1034 or dcolantuono@rparks.org



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Registration:

A one-time enrollment to the pre-requisite is required. All participants enrolled in the pre-requisite will receive an automated email notification from ePACT to create your child's electronic profile. Your child's ePACT is inclusive of parent/guardian and pick-up contact info, emergency contact information, medical needs, program policies, etc. Each Wildcat Care participant's ePACT MUST be complete prior to their first day of attending the program. Participants will be denied access to the program in the event their ePACT is not completed at 100%.

ID#	Program	Fee
228323-C1	Wildcat Care 8:30am-3:00pm Pre-Req	Free
228323-C2	Wildcat Care 8:30am-3:00pm (Select days)	\$36/day
228323-C1	Wildcat Care 8:30am-12:30pm Pre-Req	Free
228323-C3	Wildcat Care 8:30am-12:30pm (Select days)	\$22/day
228323-C1	Wildcat Care 11:00am-3:00pm Pre-Req	Free
228323-C4	Wildcat Care 11:00am-3:00pm (Select days)	\$22/day

How to Register:

Email Registration:

1. Send a copy a completed Roselle Park District Registration Form, a completed Wildcat Care Registration Form (to select days), and Payment Authorization Form to frontdesk@rparks.org or dcolantuono@rparks.org

In-person Registration (CRC Front Desk M-F 9am-6pm)

1. Bring your completed Roselle Park District Registration Form, a completed Wildcat Care Registration Form (to select days), and Payment Authorization Form to the front desk. These forms are also available at the front desk and can be provided to you at time of registration.

Online Registration through rparks.org:

1. Go to rparks.org and click Register
2. Login with your household ID# and password
3. In Quick Links section select Browse Activities
4. Search by using Keyword Search (Wildcat) or Activity Number (228323)
5. Select the Wildcat Care program and correlating activity code
6. Select the days on the calendar which you need care for and add to cart
7. Pay in full for all days selected at time of registration

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Wildcat Care: Registration Form

Please register in advance, all registrations must be complete by 11/29.

Grade (please check one): K 1 2 3 4 5

Participant's Name _____

Parent/Teacher Name _____

Select Days of Care:

The Wildcat Care Program is designed to be flexible for the days you need care. Registration is completed per day/date for \$36 or \$22 per day depending if you choose full or partial day. Highlight or circle the days which you need childcare. Full payment for all days selected is due at time of registration.

Monday	Tuesday	Wednesday	Thursday	Friday
12/7	12/8	12/9	12/10	12/11
12/14	12/15	12/16	12/17	12/18

**A registration form with dates for January and beyond will be available if School District 20 stays in remote learning after the holidays. Payment in full is due for all dates which are registered for.*

- Registration must be complete 8 days prior to care being needed.
- Payment in full for all days selected is due at time of registration. No payment plans are available.
- Days missed due to absence are non-transferable and non-refundable and will be taken on a case-by-case basis.
- Days missed due to absence from COVID exposure, quarantine, and/or illness will be transferred or refunded.
- Programs have a maximum of 9 participants, anyone enrolled past 9 will be put on a waitlist until a second group can be formed.

Once registration is complete you will receive an emailed receipt of payment and a notification from ePACT to create and/or update your child's electronic profile. Your child's ePACT is inclusive of parent/guardian and pick-up contact info, emergency contact information, medical needs, program policies, etc. Each Wildcat Care participant's ePACT MUST be complete prior to their first day of attending the program. Participants will be denied access to the program in the event their ePACT is not completed at 100%.

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Wildcat Care: Payment Authorization Form

Program (please check one): 8:30am-3:00pm (228323-C2) 8:30am-12:30pm (228323-C3) 11:00am-3:00pm (228323-C4)

Participant's Name _____

Parent/Payee Name _____

Home Phone _____

Cell Phone _____

Email Address _____

Credit Card Information:

- Visa
- Mastercard
- Discover

Card #: _____

Expiration Date: ____/____

3 Digit Security Code: _____

If payments are declined your registration will not be processed and your child will not be able to attend until payment is successful.

I hereby authorize the Roselle Park District to initiate charges for the purpose of payment for the programs listed above, according to the attached schedule of fees, to the credit/debit card listed above. I further authorize the Roselle Park District to initiate credits to my account to correct any errors and the Financial Institution to initiate any such corrections to my account. This authority is to remain in full force and effect until Roselle Park District and the Financial Institution have received written notification of its termination in such time and in such manner as to afford Roselle Park District and the Financial Institution a reasonable opportunity to act on it prior to debiting the account.

Authorized Signature _____

Date _____

Americans with Disabilities Act:

The Roselle Park District intends to comply with the intent and spirit of the Americans with Disabilities Act. If you need any special accommodations the Park District will make all reasonable efforts to accommodate you. Please call the Park District at 630-894-4200 to make arrangements.

Americans with Disabilities Act Special Needs? Yes No

Waiver and Release of All Claims:

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in the above program(s), you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the above program/programs (including transportation services and vehicle operations, when provided). "I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I or my child/ward may have against the Park District and its officers, agents, servants and employees as a result of participating in any of the above program(s). I waive and relinquish all claims I or my children may have against the Park District and its officers, agents, servants and employees as a result of participating in any of the above programs. I hereby fully release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation of the participation of my child/ward in any of the above program(s). I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or by my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). "I understand that unless specifically stated in writing at the time of registration, photographs of participants may be taken and used for promotional purposes." Registration will be accepted by mail or fax. You mail your form to the Roselle Park District or send by facsimile transmission to (630) 894-5610. When registering by online or via fax, it is mutually understood that the facsimile registration document (including the waiver and release of all claims) shall substitute for and have the same legal effect as the original form. "I have read and fully understand the above program, details and waiver and release of all claims."

Authorized Signature _____

Date _____