



# District 7 Kid Zone 2018-19 Enrollment Form

### FOR OFFICE USE ONLY

Application Received: \_\_\_\_\_  
 Payment Amount: \_\_\_\_\_  
 Cash  Check# \_\_\_\_\_  Online  
 EZChild:  Register  Enroll  Activate  
 eSchoolPLUS  
 Start Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Child Name: \_\_\_\_\_ Male / Female

Child Address: \_\_\_\_\_ City & Zip \_\_\_\_\_

School/Kid Zone Site: \_\_\_\_\_ 2018-19 Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent Information	
Parent Name:	Parent Name:
Address or same as above:	Address or same as above:
City/ Zip:	City/ Zip:
Home /Cell Phone:	Home/Cell Phone:
Work Phone:	Work Phone:
Authorized to Discuss Account Billing: YES NO	Authorized to Discuss Account Billing: YES NO
Authorized to Make Enrollment Changes: YES NO	Authorized to Make Enrollment Changes: YES NO
Has your family used Kid Zone in the past: YES NO	
Do you have more than 1 child enrolled in Kid Zone? _____	

### Kid Zone Service Level:

- BOTH A.M. and P.M. (\$80/wk)     A.M only (\$55/wk)     P.M. only (\$55/wk)

\*First week's fees are due in advance. Fees are normally billed on Monday with payment due on Friday of the same service week. Please make checks payable to: ECUSD7

### Online Payment System information (must have at least one email):

Electronic Statements are generated weekly from our online system (EZChildTrack) which will be sent to the primary account holder's email listed below.

Primary Account Holder: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Account Holder: \_\_\_\_\_ Email: \_\_\_\_\_

Are you or your spouse an Edwardsville Community Unit School District 7 Employee?  YES  NO

Do you plan to apply for financial assistance?  YES  NO

\*\* If yes, circle one: CHASI - Change of Provider - DCFS

**\*\*You are responsible for all charges until a verification letter is received. Co-pays are to be paid by the 15<sup>th</sup> of each month\*\***

# District 7 Kid Zone Parent Agreement Form 2018-19



Child's Name: \_\_\_\_\_

## Service Changes:

- I understand that it is **my responsibility** to notify the Kid Zone Office **by 3:00 p.m. on Thursday prior to the week** with any changes to my service level. Credits will not be issued for late or lack of notification. \_\_\_\_\_ **Please initial**
  - Do not contact the school office or notify site staff to make changes to enrollment.

## Payment: I understand that I am responsible for all financial charges accrued through my use of Kid Zone.

- Weekly payment is due **by Friday** of the service week.
- Shortened weeks will be prorated for school holidays/institute days.
- Inclement weather days are not credited as service is offered/makeup days are added to the calendar.
- **Lack of payment will result in services being revoked or suspended.**

## Registration: I understand that I am responsible for following all registration procedures.

- Accounts must be in good standing to register for the Kid Zone services.
- Midweek start dates are not permitted.
- No registrations or changes to registration are accepted at the school/site level.
- **Start date will be assigned when all paperwork** (Registration Form, Parent Agreement, and Emergency Contact & payment) have been submitted to **the Kid Zone Office.**

## Full Day Sessions: I understand that I am responsible for following all Full Day registration procedures.

- There is a **separate fee and registration process for Full Day sessions.**
- Accounts must be in good standing to register for a Full Day Session.
- Additional critical care items must be provided on all full day sessions. Items should be clearly labeled with my child's name, his or her Kid Zone site, and then placed in a zip lock bag with a copy of the ***District 7 Request For Medication to be Administered at School*** form.

## Behavior: I understand that my child is expected to behave in accordance with the Edwardsville CUSD 7 Handbook and the rules of the school site.

- I have a copy of the District 7 Handbook, or will access a copy of the Handbook online.
- **Continual behavior issues may result in service being suspended or revoked.**

## Parent Drop Off/Pick Up: I understand that I am responsible for following all pick up and drop off procedures and it is my responsibility to have a plan in place for someone to pick up my child in the event of delays due to inclement weather, highway congestion, or personal emergencies.

- **Children must be escorted into the building and signed into the program each session.**
- Only authorized Parent or Authorized Designees listed may sign in or sign out your child from the site.
- **Current picture identification will be required.**
- **A late pick up fee of \$1/minute will be charged per child from 6:01-6:15pm.**
- **Then a fee of \$5/minute, per child, will be charged after 6:15pm.**
  - After 6:01 staff will attempt to contact a parent/guardian or emergency contact person to pick up the child.
  - Repeated late pick-ups will be reviewed by Kid Zone Director and may result in services being suspended or revoked. \_\_\_\_\_ **Please initial**

## Permissions:

All permissions given via my child's full District 7 school registration forms are applicable to the time my child is in attendance in Kid Zone. ***This includes all information listed on my child's health and medical forms, and photo release permissions.***

**I understand that District 7 Kid Zone is a license-exempt facility operated by ECUSD7 and is not regulated by DCFS.**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# District 7 Kid Zone 2018-19 Child Information Form

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Child's Name: \_\_\_\_\_

To help us provide the appropriate level of care, please answer the following:

**Chronic/Severe Health Condition**  YES  NO  
(Asthma, Diabetic, etc.)  
If Yes, please explain: \_\_\_\_\_

**Critical Care Items**  YES  NO  
(EpiPen, Inhaler, etc.)  
If Yes, please explain: \_\_\_\_\_

**Custodial Agreement**  YES  NO  
(Copies of any court ordered custody arrangements must be on file with District 7)

**Individual Education Plan\***  YES  NO  
If Yes, please explain: \_\_\_\_\_

**Behavioral Intervention Plan\***  YES  NO  
If Yes, please explain: \_\_\_\_\_

**504 Student Accommodation Plan\***  YES  NO  
If Yes, please explain: \_\_\_\_\_

**OR**

(please check) **Prefer not to disclose any above information**

\*Additional staff may be required to accommodate the needs of your child in our program. This may delay the start of your child in to the program. You will be contacted if this is necessary.

**District 7 Kid Zone holds all information confidential and in accordance with Edwardsville School District Board Policies, HIPPA, and FERPA.**



# District 7 Kid Zone 2018-19 Emergency Contact Information

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<b>Child Information</b>	Child's Name: _____ Male/Female
	Grade (2018-19): _____ School/Site: _____

<b>Parent Information</b>	<b>Parent's Information</b>	<b>Parent's Information</b>
	Name:	Name:
	Relationship:	Relationship:
	Phone:	Phone:
	Work Phone:	Work Phone:
	*Authorized to Pick Up: YES NO	*Authorized to Pick Up: YES NO

\*Please note: Copies of any court ordered custody arrangements must be on file with District 7

**Other than parents listed above:**

<b>Authorized Pick Up Designees</b>	<b>Contact 1</b>	<b>Contact 2</b>
	Name:	Name:
	Address:	Address:
	City:	City:
	Phone:	Phone:
	Relationship:	Relationship:
	Authorized to Pick Up: YES NO	Authorized to Pick Up: YES NO
	<b>Contact 3</b>	<b>Contact 4</b>
	Name:	Name:
	Address:	Address:
	City:	City:
	Phone:	Phone:
	Relationship:	Relationship:
Authorized to Pick Up: YES NO	Authorized to Pick Up: YES NO	

In the event that changes or additions need to be made to your emergency contact list, contact the Kid Zone office at 655-6011. **Students will only be released to individuals listed on this form.** All pick up designees will be asked to show current photo identification and must be 18 years or older.

**Photo Release:** I authorize District 7 Kid Zone to use photographs of my child in District 7 communications such as brochures, District 7 Website and media relations documents: **YES or NO**

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(Signature of Parent completing this form)

(Date)

# District 7 Kid Zone

## 2018-2019 Payment & Program Information

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You may begin registering for 2018-19 Kid Zone after July 2, 2018, at the Hadley House. THE DEADLINE FOR 2018-19 KID ZONE REGISTRATION IS **AUGUST 6, 2018** IN ORDER TO START KID ZONE THE FIRST DAY OF SCHOOL (AUGUST 14, 2018).

**Registration forms received after August 6, 2018, will be assigned a start date.**

**Weekly Fees: \$80 per week for both AM & PM      \$55 per week for "AM only" or "PM only"**

- Multiple child discounts are available for children living within the same household.
- Kid Zone fees are prorated during the weeks when scheduled Full Day sessions occur and scheduled "no student attendance" days per the district calendar.
- Weekly fees are not pro-rated based on daily attendance, or for inclement weather days as Kid Zone session(s) are offered on any days added to the District 7 calendar.

### **Payments:**

- **Electronic statements** are generated weekly from our online system (EZChildTrack) which will be sent to the primary account holder's email.
- **New online accounts** in EZChildTrack are activated after July 20. All paperwork and fees must be received at Hadley House in order for new accounts to be activated.
  - Account information and a temporary password will be sent from our online system EZChildTrack to the email provided.
  - Contact Kid Zone office at 618-655-6011, if you need your password reset.
- **Weekly fees are due by Friday of each week of service.**
  - Weekly fees can be made via the online system by auto pay or manual payments of echecks or credit/debit cards.
  - Weekly fees can also be paid by mail or in person at the Hadley House (708 St. Louis St, PO Box 250, Edwardsville IL 62025) by cash (exact change only), check or money order.

### **Suspension of Service:**

- **Failure to pay your account balance will result in suspension or cancellation of your child's Kid Zone enrollment.**
- Children may be suspended or withdrawn from the program for the following reasons based upon the Director's recommendation to the Superintendent:
  - Non-payment of account
  - Chronic behavior problems
  - Failure to follow program procedures by student or authorized adult
- To reinstate suspended services due to non-payment:
  - Account must be paid in full
  - May be required to enroll in auto pay
  - It is expected that all payments will be paid on time upon reinstatement

### Registering Parent and Emergency Contacts:

- If the registering parent indicates that the other parent is not authorized to discuss billing or make enrollment changes, then it is the responsibility of that registering parent to notify the other parent.
- If the registering parent indicates that the other parent is NOT authorized to pick-up, then custody papers MUST be on file with the school and Kid Zone office.
- **The addition and removal of names from the Authorized Pick-up list must be done by the parent who registered the student in Kid Zone.** *Changes will only be made by contacting the Kid Zone office (not the school site).*

### Making Changes to Your Kid Zone Level of Service:

It is the responsibility of the parent to notify the Kid Zone office with **ANY** changes to your child's enrollment.

- Any change to your level of service must be communicated to the Kid Zone office **by 3:00 p.m. Thursday prior to the week the change will occur.**
  - Kid Zone Business Office: (618) 655-6011
  - Email: [kidzone@ecusd7.org](mailto:kidzone@ecusd7.org)
- Please do not contact the school office or individual sites to make service changes.
- **No credits will be issued** if notification is not received by the deadline, as staffing and programming costs are based upon each site's enrollment totals.
- If an ongoing schedule is provided to the Kid Zone office, it is the responsibility of the parent to notify the Kid Zone Office of any changes or updates.
- Any changes to afternoon dismissal that alters your child's attendance to their PM Service must be communicated to the Kid Zone office, as well as to the teacher and school secretary.
- No additional services will be added, including Full Days, if there is a balance on your account.

### Full Days:

- The Full Day Session calendar that includes all submission deadlines is located at [www.ecusd7.org/kidzone](http://www.ecusd7.org/kidzone) for the 2018-19 program.
- A separate registration form is required for each Full Day session and will be emailed to the address provided upon registration prior to each full day session. **We will no longer mail forms via US Mail.** Your account must have a zero balance in order to utilize full day sessions.
- Breakfast and lunch are available for purchase through District 7 Food Service and will be billed directly to your Kid Zone account (not school lunch account) during full day sessions. Free &/or reduced status cannot be applied during full day sessions.

### Tax Statements:

- District 7 does not mail tax statements to Kid Zone account holders.
- Tax statements can be accessed and printed from the online parent portal (from a desktop computer, not your phone) under "view statement" tab after mid-January.