



EXTRACURRICULAR ACTIVITY FORM

Please submit form to one of the following: Sunset Community Center- 710 Western Avenue
 Fax to (630)232-4569 or email to info@genevaparks.com

Child's Name: _____

Parent Name: _____

School/ KZ Site: _____

Phone Number: _____

| Activity | Day (Please circle all that apply) | Start Date | End Date | Start Time | End Time | Returning to Kids' Zone after activity? |
|----------|---------------------------------------|------------|----------|------------|----------|---|
| | M Tu W Th F | | | | | YES - NO |
| | M Tu W Th F | | | | | YES - NO |
| | M Tu W Th F | | | | | YES - NO |
| | M Tu W Th F | | | | | YES - NO |

I understand that the Geneva Park District is not responsible for my child during their enrollment in an extracurricular activity. I am aware that the group leader for the extracurricular activity is responsible for making sure that my child returns to the Kids' Zone Program, if I have so specified above. I am also aware that there are no refunds or credits from the Kids' Zone program due to time spent away from it, for the purpose of extracurricular activity.

SIGNATURE OF PARENT/LEGAL GUARDIAN

PRINT NAME

DATE