

## DAY OFF FUN ZONE REGISTRATION FORM (January 2024-End of School Year)

(one form per child)

Child's Name	Child's Name Parent's Name				
K-5th Grade: Looking for some fun filled activities on your day off of school? Day Off Fun Zone is   Day Off Fun Zone is held at Western Avenue School     the place to be! Join your friends for a structured day of on-site adventures including arts and   Crafts, active games, themed activities and more!					
Day/Date	Fun Zone Hours (8:00am-2:15pm)	AM Hours (6:30-8:00am)	PM Hours (2:15-6pm)	Registration due date, pending space available	
Detailed Participant Profile Forms are required to register for our Day Off Fun Zone	\$47 (N/R \$70) per trip	\$13 (N/R \$19) per day	\$26 (N/R \$39) per day		
GENERAL					
Monday, January 15	☐ 1212001-1A	□ 1212001-1B	1212001-1C	Jan. 8	
Monday, February 19	☐ 1212001-2A	🗌 1212001-2В	☐ 1212001-2C	Feb. 12	
Friday, March 1	☐ 1212001-3A	☐ 1212001-3B	☐ 1212001-3C	Feb. 23	
SPRING BREAK					
Monday, March 25	1212002-1A	1212002-1B	1212002-1C	Mar. 18	
Tuesday, March 26	1212002-2A	🗌 1212002-2В	1212002-2C		
Wednesday, March 27	1212002-3A	☐ 1212002-3B	1212002-3C		
Thursday, March 28	🗌 1212002-4A	☐ 1212002-4B	☐ 1212002-4C		
Friday, March 29	☐ 1212002-5A	🗌 1212002-5В	☐ 1212002-5C		
END OF SCHOOL YEAR					
Tuesday, May 28*	☐ 1212003-1A	☐ 1212003-1B	1212003-1C		
Wednesday, May 29*	☐ 1212003-2A	☐ 1212003-2B	1212003-2C	May 21	
Thursday, May 30*	☐ 1212003-3A	☐ 1212003-3B	1212003-3C	*These days are between the last	
Friday, May 31*	1212003-4A	1212003-4B	1212003-4C	day of school and the first day of	
Monday, June 3*	☐ 1212003-5A	☐ 1212003-5B	1212003-5C	camp.	
PERSONS WITH SPECIAL NEEDS: The Park District makes reasonable accommodations for persons with special needs to participate. Please specify any adaptive equipment, personnel or other accommodations you need to participate in a program for which you have registered.					
al activities connected with or associated with the program (5)/activity(ies). If urther agree to wave and relinguish all dains if or my minor child/ward may have (or accure to me or my child/ward) as a result of participating in this program/calivity agains the Park Districi. The Park Districi reserves and employees thereinafter collectively referred as "Particip". I do hereing the Particip Strict, and wave rad release of all dains. If registering on-line or via fax, my on rime or faciline signature shall substitute for and have the same legal effect as an originature. Junderstand that my child/ward or me to be used to promote the Park Districi. PARTICIPATION WILL BE DENED If the signature of adult participant or met by used or more to subscience of the park event during park bistrici activities, programs, events, and facilities for publication and use as the Park Districi. PARTICIPATION WILL BE DENED If the signature of adult participant or parent/guardian and date are not on this waiver. Photo/Video Disclaimer: All participants permit the taking of photos and/or video of themselves and their children during park bistrici activities, programs, events, and facilities for publication and use as the Park Districi. PARTICIPATION WILL BE DENED If the signature of adult participant or parent/guardian and date are not on this waiver. Photo/Video Disclaimer: All participants permit the taking of photos and/or video of themselves and their children during park bistrici activities, programs, events, and facilities for publication and use as the Park Districi. Participant or par				SE NOTE: a sack lunch and s daily, unless wise notified. Ite Days and School ays are not included Kids' Zone install- plan, but may be ered for separately.	
SIGNATURE Your credit card charged when your credit card					
I have carefully read the Insurance Liability waiver on this form and understand that my signature is required below in order for myself or my child/ward to participate in the Geneva Park District programs. My signature also authorizes payment via the credit/debit card number if provided for payment.					
Signature of Participant, Parent or Guardian registration				e see above for ration deadlines.	
Office lise Only Prepared by: Date: Amount: Pmt Method: is not availab				available for Day	
Copy given to:		ersonal Training Priv. Lesson RB/WB League Oth	Off Fu	n Zone.	