



**C.A.P. ENROLLMENT AGREEMENT
2026-2027**

By enrolling my child, _____, in the C.A.P. program for the 2026-2027 school year, I understand the following:

1. The C.A.P. program is open according to the official school calendar of School District's 25, 21 & 59 and is closed during inclement weather days. Programs will run after school on early dismissal/half days and is included in the cost. Full Day Programs will run on most school holidays and all institute days at additional costs to the participant. You must register separate for these days.
2. I am responsible for the payment of monthly fees, which are due by the first of each month. A \$70 Non-Refundable Registration fee is due at time of registration. The monthly payments will be made in 9 installments (*or however many payments remain based on start date*), the first processed on August 1, 2026 and terminating on April 1, 2027. If a parent/guardian is delinquent on the child's account, the child will be suspended or removed from the program, unless special arrangements have been made with the C.A.P. Manager.
3. In the event of any absences during program hours/activities, I will be responsible for fees for time reserved, not actual time spent at the program. I understand that it is my responsibility to call the site and inform them of any absences. Failure to do so may end up in dismissal from the program. Also, if my child is ever picked up after 6:00 pm, I agree to adhere to the policy and fees regarding late pick-up, as stated in the C.A.P. Parent Manual.
4. In the event your child has to miss school because of COVID, or any other virus, AHPD will not issue any refunds.

I agree to adhere to the stated policies and procedures of the C.A.P. program as stated here and in the Parent Manual. I give my child permission to participate fully in this program.

Parent/Guardian Signature _____ **Date** _____

Reasonable Accommodations

The Arlington Heights Park District works in collaboration with Northwest Special Recreation Association (NWSRA) to provide additional training to park district staff and when necessary, an inclusion aide to assist the registrant within the program. In order to provide the best customer service, please notify the park district at least two weeks prior to the start of the program. For requests received after that time frame, the best efforts will be made to accommodate the registrant.

Request NWSRA Assistance _____ Request more information for accommodations _____ N/A _____