



Funshine Treehouse 2026-2027 School Year Registration Form

Please fill out this form carefully. Incomplete or inaccurate information will delay your registration.

Registration continues until classes are filled.

- Priority Registration Begins**
(Current Students & Alumni Families)
Saturday, January 10, 2026
- Resident Registration Begins**
Saturday, January 17, 2026
- Nonresident Registration Begins**
Saturday, January 24, 2026

Family's Last Name: _____

Home Phone #: _____

Address: _____

Cell Phone #: _____

City, Zip _____

Name of Parent _____

Parent's Work #: _____

E-Mail Address: _____

Name of Parent _____

Parent's Work #: _____

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK Please read this form carefully and be aware that in signing up and participating in the below identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs/activities against the Dundee Township Park District including its officials, agents, volunteers and employees.

PHOTO/VIDEO POLICY The District occasionally takes photographs or video of participants for promoting/advertising our programs, services, events, activities, and facilities in our brochures, website or agency social media, and other promotional avenues. By registering for, participating in or attending District programs, events, or other activities, the participant (or parent/guardian of a minor participant) irrevocably agrees to the use and distribution by the Park District of his or her image (or of his minor child/ward) in photographs, video recordings, and any other electronic reproductions of such programs, events and activities for any purpose without inspection or approval and without compensation, rights to royalties or any other consideration now and in the future.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, my facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name _____

Participant's Signature _____

(18 years or older or Parent/Guardian)

Date _____

PARTICIPATION WILL BE DENIED if the signature of a parent/guardian and date are not on this waiver.

Fill in 1st & 2nd Choices to better your chances for getting into a preschool class. One choice will not guarantee your spot.

Participant's Name	Sex	Birthdate	Sibling	Program Number	Age	Fee
	<input type="checkbox"/> M					
	<input type="checkbox"/> F					
	<input type="checkbox"/> M					
	<input type="checkbox"/> F					



ADA/INCLUSION/ACCOMMODATIONS:

All ADA, inclusion needs, and accommodation requests must be submitted two weeks prior to the start of a program. To make a request complete the ADA/Inclusion/Accommodations request form on the DTPD website.

A payment plus a \$40 nonrefundable yearly registration fee per child are required upon registration.

Yes, I have read and signed the waiver and notice regarding accommodation and ADA request.

PAYMENT Complete the attached Automatic Credit/Debit Authorization Form.

Total Fees: _____

Registration & Payment

In-Person

Payment Method: Cash, Check, or Credit Card

Fill out the Registration Form and return it to Rakow Center 665 Barrington Ave. Carpentersville, IL 60110 or Randall Oaks Recreation Center 500 N. Randall Rd. West Dundee, IL 60118

Registration forms are processed during

guest service hours: Monday-Thursday 9:00 am-8:00 pm; Friday: 9:00 am-5:00 pm; Saturday: 9:00 am-Noon
Holiday Hours may vary

Mail-In

Payment Method: Check Only made payable to:

Dundee Township Park District
(cash and credit cards are not accepted through the mail).
Print and complete the Registration Form.

Mail the completed form along with your check to:

Dundee Township Park District
Rakow Center 665 Barrington Ave.
Carpentersville, IL 60110 or
Randall Oaks Recreation Center 500 N. Randall Rd.
West Dundee, IL 60118

Online

Payment Method: Credit Card
www.dtpd.org

Questions?

Contact us at:
Phone: (847) 428-7131
Email: guestservices@dtpd.org
www.dtpd.org



Funshine Treehouse Automatic Credit/Debit Authorization Form

School Year 2026-2027

HH# _____

Date: _____

- New Enrollment
- Credit Card/Debit Card Update

Parent/Guardian Name: _____

Address: _____ City: _____ State: _____

Email: _____ Phone: _____

CHILD(REN) ENROLLED

Last Name:	First Name:	Program Number:	Monthly Fee:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- I understand and agree that my credit/debit card noted below will be automatically charged on the 1st of each month. If the 1st of the month falls on a Saturday, Sunday or District holiday, the card will be charged on the next business day the office is open starting in August through April.
- I also understand and agree that my child(ren)'s enrollment in the program may be suspended or cancelled at the discretion of the Manager until an updated form of payment is received and successfully processed. If full payment is not received by the 15th of the month, a \$25 late payment fee will be added to the balance due.
- I understand and agree to give the Dundee Township Park District authorization to charge the credit/debit card noted below for any and all past due Funshine Treehouse fees.
- I understand and agree to give the Dundee Township Park District authorization to charge the credit/debit card noted below for any and all past due Funshine Treehouse fees.

AUTOMATIC PAYMENT ELECTION **PAYMENTS ARE PROCESSED - AUGUST THRU APRIL**

- Payment Type Credit Card Debit Card DTPD cannot accept Flexible Spending Account cards for payment.
- Card Type Visa MasterCard Discover American Express

Name on Card: _____

Last Four Digits of Card Number: _____ Expiration Date: _____

Total Monthly Charge: \$ _____

With my signature below, I understand and agree to all of the terms outlined above in this agreement.

Parent/Guardian Signature: _____ Date: _____