



Geneseo Park District

September 1, 2010

Geneseo Community School Dist. #228
209 S. College Ave
Geneseo, IL 61254
Attn: Jack Schlindwein

Dear Mr. Schlindwein:

This is just a reminder that your Geneseo Community School District #228 Business Membership will be expiring on October 31, 2010. Your membership should be renewed before it expires so your privileges do not lapse.

Please note in the enclosed brochure that you have two options: Your business has the opportunity to pay a non-refundable annual fee of \$300.00, allowing all of your employees to receive a 25% discount on the annual membership of their choice. The second option is for your business to pay a non-refundable annual fee of \$575.00, allowing all of your employees to receive a 35% discount on the annual membership of their choice.

Enclosed with this letter is a list of Geneseo Community School District employees who have benefited from your business membership in the past.

When renewing, please verify that the enclosed membership activation form is correct and update any changes. Also, please be sure and sign the activation form and send it in with your payment. If you have any questions, feel free to contact the Geneseo Community Center office at 944-5695. If you have already renewed, please excuse this letter.

Sincerely,

Carla L. Lee, Receptionist
GENESEOPARKDISTRICT

The mission of the Geneseo Park District is to enhance the quality of life in our community by providing excellence in customer service, maintaining fiscal and environmental stewardship, and continuing a philosophy of inclusion to ensure a positive recreational experience for all.



Geneseo Park District



BUSINESS MEMBERSHIP ACTIVATION FORM

Name of Business: Geneseo Community School Dist. #228

Business Address: 209 S College Ave
Geneseo, IL 61254

Contact Person: Jack Schlindwein

Business Phone: 309.945.0450

Expiration Date: October 31, 2011

Discount Amount: \$300.00 for 25% \$575.00 for 35%
(Please circle your choice)

Number of Employees: 314

Contact Person's Signature: Jack B. Schlindwein

OFFICE USE ONLY

Amount Paid: _____

Cash _____ Check Number _____ Credit Card _____

Date of Activation: _____

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