

Early Childhood Programs
2009-2010 Registration Form

Please note: A copy of the child's birth certificate must be attached to this registration form. We cannot process any registration that is not accompanied by a copy of the child's birth certificate.

Family Name _____	Child's Name _____
<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth _____
Age as of 10/1/09 _____	Mother's Name _____
Day Phone _____	Evening Phone _____
Cell Phone _____	E-Mail Address _____
Home Address _____	
Work Address _____	
Father's Name _____	Day Phone _____
Evening Phone _____	Cell Phone _____
E-Mail Address _____	
Home Address _____	
Work Address _____	

_____ **Medical Permission:** I hereby give permission for my child to participate in all JCC Early Childhood activities, including trips away from the Jewish Community Center of Central New Jersey (JCC). I understand that the JCC does not assume responsibility for injury and that, in case of emergency, I hereby give permission to the JCC to secure medical treatment for my child at a hospital or physician selected by the JCC at no cost to the JCC staff or agency.

_____ **Siblings:** I am enrolling more than one child in the JCC Preschool, Kindergarten, Kindergarten Kids or Kidzone.

_____ **Friend Request:** _____ *(Must be reciprocal)*
 I realize that only one friend may be requested, and that this request is not a guarantee. Requests and/or changes will not be accepted after April 15, 2009.

Parent Signature: _____ *(cont'd on back)*

(cont'd from front)

Please check off the program that is being registered.

	Program	Days	Time	Fee \$	Deposit \$
<input type="checkbox"/>	2 day 2's	Tues. & Thurs.	9:00 am – 11:30 am	\$ 2,560	\$ 256.00
<input type="checkbox"/>	3 day 2's	Mon., Wed., & Fri.	9:00 am – 11:30 am	\$ 2,875	\$ 287.50
<input type="checkbox"/>	3 day 2's	Mon., Wed., & Fri.	9:00 am – 12:30 pm	\$ 3,865	\$ 386.50
<input type="checkbox"/>	3 day 3's	Mon., Wed., & Fri.	9:00 am – 12:30 pm	\$ 3,865	\$ 386.50
<input type="checkbox"/>	5 day 3's	Mon.-Fri.	9:00 am – 12:30 pm	\$ 4,850	\$ 485.00
<input type="checkbox"/>	Full Day 3's	Mon.-Fri.	9:00 am – 2:30 pm	\$ 7,620	\$ 762.00
<input type="checkbox"/>	5 day 4's	Mon.-Fri.	9:00 am – 12:30 pm	\$ 4,850	\$ 485.00
<input type="checkbox"/>	Full Day 4's	Mon.-Fri.	9:00 am – 2:30 pm	\$ 7,620	\$ 762.00
<input type="checkbox"/>	Kindergarten	Mon.-Fri.	9:00 am – 3:00 pm	\$ 8,015	\$ 801.50

Deposit Payment Option

Check Enclosed (please make check payable to the JCC of Central NJ)

Visa Mastercard American Express

Card #: _____

Expiration Date: _____

Security Code: _____

Name on Card: _____

Signature: _____

Date: _____

Please return this form and the above deposit to:

The JCC of Central New Jersey, Wilf Jewish Community Campus, 1391 Martine Avenue,
Scotch Plains, NJ 07076

- *JCC family membership is required for registration in Early Childhood Programs*
- *A one time Capital Reserve fee of \$250 is due at the time of registration unless your family is new to the JCC. In that case, the Capital Reserve fee will be assessed when membership is renewed.*
- *A 10% deposit (see above) will be due at time of registration. This deposit will be the June 2010 tuition and is non refundable.*