SUMMER



NSJCC SUMMER PROGRAM REGISTRATION FORM (2022)

Please return this form to: <u>Susann@nsjcc.orq</u> or NSJCC, 240 Lynnfield St., Peabody, MA 01960

Child's Name: D.O.	.B. M/F:
Address:	
City: State	te: Zip:
Parent Name: Pare	ent Name:
Cell Phone: Cell	Phone:
Evening Phone: Even	ning Phone:
E-mail: E-ma	ail:
Please select the weeks and days your child will be atter	nding:
[] Week 1: June 27– July 1	 [] Week 5: July 25 – July 29
[] Week 2: July 5 – July 8 (NSJCC is closed Monday, July 4)	[] Week 6: August 1 – August 5
[] Week 3: July 11– July 15	[] Week 7: August 8 – August 12
[] Week 4: July 18 – July 22	[] Week 8: August 15 – August 19
Please indicate days and times of enrollment:	Before/After-Camp Care
[] MondayAM	<u>PM</u>
[] TuesdayAM	PM [] Simcah-on-the-Hill
[] Wednesday AM	PM [] Camp Hadar
[] ThursdayAM	<u>PM</u>
[] FridayAM	<u>PM</u>
I hereby apply to enroll my child in the North Suburban Jewish Community Center (NSJCC) for the 2021 Summer Program. A \$100.00 non-refundable registration fee is attached and will be applied to your summer tuition. I understand that I am responsible for the summer tuition in full and that no refunds will be made unless my child is withdrawn for medical reasons with a doctor's certification. Parents make a financial commitment for the entire tuition of the program chosen. I understand that if I have two or more children enrolled in the early childhood program at the same time, I will receive a 15% discount off the lowest priced tuition, not to be combined with any other discount. I understand that there is no credit given for illness, vacation, withdrawal, or other days missed. I understand that if my account is not kept current, NSJCC reserves the right to suspend or terminate services in addition to any other remedies it may have.	
I understand and agree that unless prior arrangements are made, I will be charged \$8.00 for every 15 minutes (or portion thereof) that my child is not picked up by his/her scheduled pickup time (\$1.00 for every minute after 6:00 pm). I understand that drop-in care is time in addition to my child's regular schedule, which is prearranged with the director. Drop-in care is on a "space available basis" and is priced as follows: Infants: \$12.00/hour; Toddlers: \$11.50/hour; Preschoolers: \$11.00/hour.	
If my account becomes overdue, and is referred to an attorney or collecti attorney's fees.	tion agency, I agree to pay all costs of collection, including reasonable
Parent/Guardian Signature	Date
For Office Use Only: Date Rec'd Deposit Date Amount \$_	Entered By: