

# JCC EARLY LEARNING CENTERS – BROOKLINE - APPLICATION 2008

Mail to: JCC Early Learning Centers – Brookline/Brighton, 50 Sutherland Rd. Brighton, MA 02135

## GENERAL INFORMATION

Child's name \_\_\_\_\_ Sex  M  F Age \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ (Birth certificate must accompany application if not already on file)  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_ Parent Email \_\_\_\_\_  
 Parent/Guardian Name \_\_\_\_\_ Cell/Work Phone (\_\_\_\_\_) \_\_\_\_\_  
 Parent/Guardian Name \_\_\_\_\_ Cell/Work Phone (\_\_\_\_\_) \_\_\_\_\_

### Payment Method:

Visa  MasterCard Card No.: \_\_\_\_\_ Exp Date: \_\_\_\_\_  
 Check Number. (payable to JCC Early Learning Centers – Brookline): \_\_\_\_\_  
 Cash: \_\_\_\_\_

Payment received: \_\_\_\_\_

### PLEASE REGISTER MY CHILD FOR 2008:

Choose your sessions:

Session 1: June 23 - July 18       Session 2: July 21 - August 15       Both Sessions

Select your weeks, days, age group and note the fee:

Toddler: 15 months – 2.9 years; Preschool: 2.9 years – 5 years

	Before 2/9/2008		After 2/9/2008		Tuition
	<input type="checkbox"/> Preschool	<input type="checkbox"/> Toddler	<input type="checkbox"/> Preschool	<input type="checkbox"/> Toddler	
<input type="checkbox"/> 4 Weeks:					
<input type="checkbox"/> 3 days	\$940	\$1,035	\$1,115	\$1,195	\$ _____
<input type="checkbox"/> 5 days	\$1,335	\$1,465	\$1,510	\$1,625	\$ _____
<input type="checkbox"/> 8 Weeks:					
<input type="checkbox"/> 3 days	\$1,515	\$1,905	\$1,755	\$2,080	\$ _____
<input type="checkbox"/> 5 days	\$2,345	\$2,585	\$2,520	\$2,745	\$ _____

### Early Drop-Off and Extended Day:

8-9am (\$9/day)  M  T  W  Th  F  
 (calculation: # \_\_\_\_\_ of days times # \_\_\_\_\_ weeks times \$9)      \$ \_\_\_\_\_  
 1-4pm (\$27/day)  M  T  W  Th  F  
 (calculation: # \_\_\_\_\_ of days times # \_\_\_\_\_ weeks times \$27)      \$ \_\_\_\_\_

Discount for family members in good standing of Leventhal-Sidman or Striar JCC  
 (\$200 off for 8-week, \$100 off for 4-week)      Less \$ \_\_\_\_\_

Sibling discount (10% off)      Less \$ \_\_\_\_\_

In order to help campers in need, I'd also like to make a voluntary, tax-deductible contribution to the Camp Scholarship Fund      \$ \_\_\_\_\_

**TOTAL AMOUNT DUE**      \$ \_\_\_\_\_

**LESS DEPOSIT** (\$200, due with application)      (\$200) \_\_\_\_\_

**TOTAL DUE BY MAY 1**      \$ \_\_\_\_\_

### Payment Options: (make checks payable to JCC Early Learning Center - Brookline)

Deposit:       Charge now       Check enclosed  
 Remaining Balance:       Charge now       Check enclosed       Charge 5/1       Bill me

**Please send me a Financial Assistance Form.** Should you not be able to accept the tuition assistance, you will be entitled to a full refund of your deposit by contacting the camp office (application also available online at [www.jccgb.org/financialaid](http://www.jccgb.org/financialaid)). Assistance is awarded based solely on financial need.

If you have a friend you would like your child to attend camp with, please indicate here:  
 \_\_\_\_\_

I authorize the JCCGB to charge my credit card for the specified amount. I understand there are no refunds after May, 1st 2008. I authorize the JCCs of Greater Boston to use still or video photographs of my child for publicity purposes.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_