

**BERNICE B GODINE JCC EARLY LEARNING CENTER (GAN SHALOM and KINDERKLUB)**

**SUMMER 2009 CAMP APPLICATION**

Mail to: Bernice B. Godine JCC Early Learning Center, Leventhal-Sidman JCC, 333 Nahanton Street, Newton, MA 02459

**GENERAL INFORMATION**

Child's name \_\_\_\_\_ Sex  M  F Age \_\_\_\_\_  
Date of Birth \_\_\_\_\_ JCC Membership # \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone(\_\_\_\_\_) \_\_\_\_\_ Parent Email \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_

**PLEASE REGISTER MY CHILD FOR 2009:**

Choose your sessions:

Session 1: June 22 – July 17  Session 2: July 20 – August 14  Both Sessions

Choose your program, session length, and note the fee:

		<u>Tuition</u>
<input type="checkbox"/> Gan Shalom (2.9 years – 5 years)	<input type="checkbox"/> KinderKlub (5+ years)	
<input type="checkbox"/> 4 Weeks: \$1,550 9:00am-1:00pm	<input type="checkbox"/> \$1,850 9:00am-1:00pm	\$ _____
<input type="checkbox"/> 8 Weeks: \$2,985 9:00am-1:00pm	<input type="checkbox"/> \$3,590 9:00am-1:00pm	\$ _____

**\*\*Special JCC Member Discount: 1 Session \$100; Full Season \$200\*\***

**Early Drop-off and Extended Day**

8:00-9:00am (\$12/day):  M  T  W  Th  F  
(calculation: # \_\_\_\_\_ days times # \_\_\_\_\_ weeks times \$12) \$ \_\_\_\_\_

1:00-4:00pm (\$36/day):  M  T  W  Th  F  
(calculation: # \_\_\_\_\_ days times # \_\_\_\_\_ weeks times \$36) \$ \_\_\_\_\_

Discount for family members in good standing with Leventhal-Sidman JCC  
(*\$100 off for 4-week enrollment; \$200 off for 8-week enrollment*) Less \$

Sibling discount (10% off, excluding early drop-off and extended day) for each additional child enrolled in Gan Shalom or KinderKlub Less \$

Early registration discount of \$100 if received before 3/1/09 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 (*\$250 due with application*) \_\_\_\_\_ (\$250)

**TOTAL DUE BY MAY 1<sup>st</sup>:** \$ \_\_\_\_\_

**Payment Options:** (make checks payable to: JCC Early Learning Center – Godine)

Deposit:  Check enclosed

Remaining Balance:  Check enclosed

**Financial assistance is available based upon need. Please request a form from the camp office.**

Any special concerns or accommodations/needs must be brought to the attention of the director at the time of registration. Payment must be made in full for registration by the end of business on May 1<sup>st</sup>, space permitting, in order to insure my child's participation in camp.

I understand that there are no refunds after May 1<sup>st</sup>, 2009. I authorize the JCC's of Greater Boston to use still or video photographs of my child for publicity purposes.

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