

Solomon Schechter 2018-19

For children entering grades K-8

Welcome to J at School!

End each day with learning, excitement and fun. J at School offers year-round enriching programming with our AfterSchool, BeforeSchool, Enrichment and School's Out programs. Highly trained JCC Staff guide children through entertaining activities, assist with homework, and provide a nurturing, safe environment where kids can learn and grow.

Monday-Thursday • AfterSchool 3:30-6pm Friday • AfterSchool 3:30-5pm Early Dismissal Fridays • AfterSchool 2-6pm at Bernard Weinger JCC

Registratio	n								
						Cost			
CHILD'S NAME					M/F	Fees cover the entire school year and are			
DATE OF BIRTH	ATE OF BIRTH GRADE IN FALL 2018					divided into 10 equal installments.			
ALLERGIES/MEDICATIONS						AfterSchool (per month)			
ALLERGIES/MEDICATIONS						5 days/wk • \$214*			
PRIMARY PARENT CONTACT NAME				DATE	OF BIRTH	4 days/wk • \$198			
ADDRESS						3 days/wk • \$161 2 days/wk • \$114			
ADDRESS						1 day/wk • \$62			
CITY			STATE	ZIP		*Program ends at 5pm on Fridays			
HOME PHONE			WORK P	HONE					
HOMETHONE			WORKET	TONE		Early Dismissal Fridays at			
CELL PHONE			EMAIL			Bernard Weinger JCC in Northbrook			
						(November 2-March 8, 17 visits)			
ALTERNATE PARENT NAME DATE C					OF BIRTH	Gym & Swim + Fitness Fun at Lustbader			
ADDRESS (IF DIFFERENT)						2-4:30pm • \$320			
						_			
CITY			STATE	ZIP		Don't need to come on a regular			
HOME PHONE WORK PHONE						basis?**			
						Pre-paid AfterSchool Card • \$230 (10 visits			
CELL PHONE EMAIL						AfterSchool 1-visit • \$30/visit **			
\square Check here if your child receives 1:1 support at any time during the school day.						**24 hour notice required. Credit Card must be			
Para mas informacion	n en Espano	l llame a Nata	alie al (312)	775-1813.		on file.			
☐ Enroll in AfterSchool (must be the same days each week)					Don't need to come on a regular basis?**				
Day(s)/week	□ 5 □] 4 □ 3	□ 2 □	1	☐ Purchase ar	AfterSchool Card for 10 visits \$230			
Day(s) of week	□ M □	T DW	□ Th □	F	□ AfterSchoo	I-visit \$30 per visit			
Start Date						must be on file)			
☐ Enroll in Early I	Dismissal	Fridays			**24 hour notice	e required. Credit Card must be on file.			



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Please complete and return this form with payment to: J at School 30 S. Wells Street Suite 4000 Chicago, IL 60606 or fax to 312.775.1818

Save time!
Register online
at jccchicago.org/
jatschool

Fee policies

Payments are charged in 10 equal installments. Payments are due on the 1st of the month for the current month and can be paid with post dated checks or auto charge on a credit card. Cash payments will only be accepted in person at a JCC office. The first month's payment is due at the time of registration as deposit for the program. Full tuition is due by June 1, 2019. Written notice must be given 30 days prior to cancellation. Participants are responsible for the entire 30 days if less than 30 days notice is given.

Registration policies

Any medications, special needs, or medical information must be submitted in writing at the time of registration. In the event J at School determines that enrollment or continued participation in J at School is not appropriate, J at School reserves the right to discontinue services. In such a circumstance, any unused portion of service fees paid will be refunded. J at School reserves the right to cancel the enrollment of an individual for reasons not limited to the following: not observing rules of the J at School outlined in the code of conduct; if a child has special needs that cannot be met by current staffing; physical or verbal abuse of staff or children; non-payment of fees.

Emergency Contac	ts						
☐ Emergency Contact☐ Authorized to Pick Up	☐ Emergency Co☐ Authorized to		☐ Emergency Contact ☐ Authorized to Pick Up NAME RELATIONSHIP TO CHILD				
Authorized to Pick Up	■ Authorized to	РІСК ОР					
NAME	NAME						
RELATIONSHIP TO CHILD	RELATIONSHIP TO CHILD						
PHONE	HONE PHONE			PHONE			
FINANCIAL ASSISTANCE		AUTHORIZA	TION - Registrat	ion is valid only with s	signature below		
Financial assistance is available to J at School accepts Illinois Action apply through the state. Applica through www.actforchildren.org.	JCC Policies I agree to abide by all the JCC Chicago payment and registration policies (available at jccchicago.org/policies).						
□ I will or have already applied f Children	Permission to Participate I grant permission for my child to attend the program(s) on the selected date(s) and release JCC Chicago of all responsibility other than reasonable care. Minimum enrollment is required. No refunds unless program does not run.						
		SIGNATURE			DATE		
PAYMENT METHOD							
☐ Visa ☐ MasterCard ☐ Disco	over 🗖 AmEx (Cash	cannot be accepte	d at school site	·)			
Automatically charge the credit will be kept confidential)	card below on the 1st of ea	ach month through .	lune 1, 2019 <i>(au</i>	thorization and c	ard number		
ACCOUNT NUMBER		EXPIRATION DATE	V	-CODE			
PRINT NAME OF CARDHOLDER							
BILLING ADDRESS OF CREDIT CARDHOLDER		CITY	STATE Z	IP			
CARDHOLDER SIGNATURE			DATE				
PAYMENT MUST BE INCLUDED	IN ORDER FOR YOUR R	EGISTRATION TO	BE COMPLETI	ED			

