

**Complete one form per child and return to:**

Bernard Horwich JCC Early Childhood • 3003 W. Touhy Avenue • Chicago, IL 60645 • 773.761.9100

## CHILD INFORMATION

Boy  Girl

Child's Last Name \_\_\_\_\_ Child's First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Birthdate (for record verification) \_\_\_\_\_

Parent Address (if different than child's) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Parent Email Address (required) \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Birthdate (for record verification) \_\_\_\_\_

Parent Address (if different than child's) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Parent Email Address (required) \_\_\_\_\_

## PAYMENT INFORMATION AND AUTHORIZATION

### Half-Day Preschool-9 Equal Installments

- Automatically charge the credit card below beginning on June 15, 2018
- Automatically draft bank account beginning on June 20, 2018

**\$500 Deposit required at time of registration\***  
 (\$250 registration fee/\$250 toward first installment)

### Fee Assistance

- I would like to apply for Financial Assistance.  
*\*the total deposit if you are applying for Financial Assistance is \$250*

## AUTOMATIC BANK DRAFT INFORMATION

Account Type  Checking  Savings

Bank Name \_\_\_\_\_

Account number \_\_\_\_\_ Routing Number \_\_\_\_\_

Name on Account \_\_\_\_\_

Bank City \_\_\_\_\_ Bank State \_\_\_\_\_

## CREDIT CARD INFORMATION

VISA  MasterCard  Discover  AmEx

Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ V-code \_\_\_\_\_

Print Name of Cardholder \_\_\_\_\_

Billing Address of Cardholder \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*(2% convenience charge for credit card payment will apply; authorization and card number will be kept confidential)*

## AUTHORIZATION - Registration is valid only with signature below

**Payment Agreement** I have read the payment information on all pages of this form. I understand the provisions, and I agree to the payment obligations stated.

**JCC Policies** I agree to abide by all the JCC Early Childhood payment and registration policies ([available at jccchicago.org/policies](http://jccchicago.org/policies)).

**Permission to Participate** For participants under the age of 18-the above named individual(s) has my permission to participate. JCC Chicago is hereby released from any liability or actions, suits, etc. for accidents or sickness through participation.

Signature \_\_\_\_\_ Date \_\_\_\_\_

# Bernard Horwich JCC

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

## Half-Day Preschool

9-month 9/6/18-6/6/19

2 YRS <i>age as of Sept 1, 2018</i>				
Half-Day Preschool	Days	Time	Price/mo	Register
5-Day 2s	M-F	9am-12pm	\$606	<input type="radio"/>
3 YRS <i>age as of Oct 31, 2018</i>				
Half-Day Preschool	Days	Time	Price/mo	Register
5-Day 3s	M-F	9am-1pm	\$767	<input type="radio"/>
4-day 3s Extended Day	M-Th	1-3:30pm	\$337	<input type="radio"/>
4 YRS <i>age as of Oct 31, 2018</i>				
Half-Day Preschool	Days	Time	Price/mo	Register
5-Day 4s	M-F	9am-1pm	\$767	<input type="radio"/>
4-Day 4s Extended Day	M-Th	1-3:30pm	\$337	<input type="radio"/>

## Half-Day Preschool/Camp Combos *(all ages are as of Sept 1, 2018)*

Day Camp 6/18/18-8/10/18 • 9-month 9/6/18-6/6/19

COMBO WITH PRESCHOOL SUMMER CAMP			
Camp + Half-Day Preschool	Camp Days   EC Days	Price/mo	Register <i>(months)</i>
8 Week 3 Day Camp + 5-Day 2s	M/W/F   M-F	\$500	<input type="radio"/> 8 Week Camp + 9 mos
8 Week 5 Day Camp + 5-Day 2s	M-F   M-F	\$515	<input type="radio"/> 8 Week Camp + 9 mos
8 Week 3 Day Camp + 5-Day 3s	M/W/F   M-F	\$640	<input type="radio"/> 8 Week Camp + 9 mos
8 Week 5 Day Camp + 5-Day 3s	M-F   M-F	\$660	<input type="radio"/> 8 Week Camp + 9 mos

COMBO WITH APACHI ROGERS PARK			
Camp + Half-Day Preschool	EC Days   Camp Days	Price/mo	Register <i>(months)</i>
8 Week Camp + 5-Day 4s	M-F   M-F	\$680	<input type="radio"/> 8 Week Camp + 9 mos