

SOLOMON SCHECHTER DAY SCHOOL - AFTER-SCHOOL ENRICHMENT PROGRAM
Sid Jacobson Jewish Community Center - 300 Forest Drive, East Hills, NY 11548
516-484-1545 ~ Fax: 516-484-7354 ~ www.sjjcc.org
Registration Form—Spring 2012

Child's Name _____ Date of Birth _____
 Address _____ City _____ Zip Code _____
 Phone _____
 Child's Doctor _____ Phone _____
 Allergies _____ Medications Taken Daily _____
 School _____ Grade _____ Teacher _____

Additional Information (please make sure that we have enough ways to reach you in case of program closing)

Parent/Guardian _____ Cell Phone _____ Work Phone _____
 Parent/Guardian Email _____
 Parent/Guardian _____ Cell Phone _____ Work Phone _____
 Parent/Guardian Email _____

EMERGENCY INFORMATION - The following people have permission to pick up my son/daughter:

Name _____ Phone _____
 Name _____ Phone _____

If paying by credit card (MasterCard, Visa or Discover only), please fill out the following information:

Credit Card # _____ Expiration Date: _____
 Signature: _____

FULL PAYMENT IS DUE AT TIME OF REGISTRATION—Please Circle Choice

ESPN Zone
 (Grades: K–5) \$385

NEW! Zumba
 (Grades: K–5) \$385

AbraKadoodle Creative Art Class
 (Grades: K–5) \$385

Karate
 (Grades: K–5) \$385

NEW! Bricks 4 Kidz—Motor Mania
 (Grades: K–5) \$385

Forms must be returned by January 27, 2012 to have your child start February 10, 2012.

1. This program is held at Solomon Schechter Day School in Jericho, New York.
2. This program follows the school calendar.
3. Please make checks payable to Sid Jacobson JCC. Check must accompany registration form. Please mail to Sid Jacobson JCC, 300 Forest Drive, East Hills, NY 11548, Attn: Solomon Schechter After-school Program or fax to 516-484-7354.
4. Late Fees: Please note that late fees are assessed if children are picked up after 3:00pm on Friday. All fees are billed to the registrant immediately following and must be paid within one week of receiving bill. The fees are as follows: \$10 for every 15 minutes following 2:45pm.
5. I give permission for the JCC to use my child's photo in all media sources (brochure, website, Facebook, etc.).

Signature of Parent or Guardian _____

PLEASE NOTE: All forms MUST be returned to the Sid Jacobson JCC, not to Solomon Schechter

