

**LEVIS JCC ZALE EARLY CHILDHOOD LEARNING CENTER
REGISTRATION 2019-2020**

Complete one form per child and return with registration fee/deposit to:

Levis JCC Betty & Marvin Zale Early Childhood • 9801 Donna Klein Blvd. • Boca Raton, FL 33428 • fax 561-852.5004 • zale@levisjcc.org

CHILD/PARENT INFORMATION

Child's Name Last First

Child's Date of Birth Boy Girl

Address

City State Zip

Home Phone

Parent Name 1

Parent Email Address (required)

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

Work Phone Cell Phone

Parent Name 2

Parent Email Address (required)

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

Work Phone Cell Phone

Are parents separated? Yes No Divorced? Yes No

Custodial Parent (if applicable)

 joint mother father other**PLACEMENT INFORMATION**

Previous teacher (if a student at Zale)

1. 2.

Please list friend(s) with whom your child would like to be placed with.
(We cannot guarantee placement.)**DUE AT TIME OF REGISTRATION**

- \$175 Non-refundable registration fee per student
- \$400 Non-refundable deposit per student, which is applied to the preschool tuition balance
- Program choice checked on appropriate box on Preschool Programs page
- Signed Arrangement For Payment form

DUE WITH FIRST TUITION PAYMENT

- \$250 Non-refundable Campus Security fee per family

SIBLING DISCOUNT

We offer a 10% sibling discount on the cost of the lower tuition.

- Check here if you have a sibling at Zale

Name _____

FINANCIAL ASSISTANCE

Anyone wishing to apply for financial assistance must submit an application by January 31, 2019 to the Adolph and Rose Levis Jewish Community Center. All inquiries and applications are kept in strictest confidence. Those applying for financial assistance must first complete the registration form and pay the registration fee of \$175 in full and a \$35 non-refundable processing fee (\$400 deposit is waived). In the event the financial assistance award is insufficient, the registration fee of \$175 will be refunded. Please submit a refund request in writing to the school office immediately for processing. Separation classes are not eligible for financial assistance.

- Check here if you intend to apply for financial aid and to have an application sent to you. A registration fee, a \$35 processing fee and a completed Arrangement for Payment must be submitted in order for an application to be considered.

Registration includes FREE JCC Sports & Wellness School Year Membership



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PLEASE READ AND INITIAL THE FOLLOWING ITEMS WHERE INDICATED AND SIGN BELOW

In enrolling my child in Adolph & Rose Levis Jewish Community Center's Early Childhood Program, I authorize the officials of Adolph & Rose Levis Jewish Community Center to act for the parents while my child is in their care. This includes the power to authorize emergency medical treatment when it is deemed necessary in my child's best interest.

Participation in any Adolph & Rose Levis Jewish Community Center activities and use of any recreational facilities involves risks of accidental injury despite all safety precautions. Having been informed of the activities to be conducted by the Adolph & Rose Levis Jewish Community Center, I/we, as an individual or as a parent or guardian of the participants named herein, assume all risks and hazards incidental to the activities and release from responsibility and agree to indemnify and hold harmless the Adolph & Rose Levis Jewish Community Center, its officers, directors, independent contractors, volunteers and all employees for any illness or injury to me or my children or my family members occurring during his/her/our participation in any activities or use of any facilities at or conducted by the Adolph & Rose Levis Jewish Community Center.

A State of Florida medical form #3040 and immunization form #680 must be submitted prior to the first day of school. **MEDICALLY CONTRAINDICATED VACCINATIONS ONLY.** *No child will be permitted to attend the first day of school without these forms.

There will be no make-up days, refunds or credits in the event of absences, weather emergencies or other school closings.

There will be an hourly rate of \$15 per hour charged for any child not picked up at their scheduled after-care pick up time. Children picked up after 6:00 pm will be charged an hourly rate for every 10 minutes past extended care hours.

CANCELLATIONS AND WITHDRAWALS

In accepting an enrollment, the school reserves a space for your child for the entire school year. If for any reason enrollment must be cancelled, the school must be advised in writing 30 days prior to withdrawal. Following written notification, parent/guardian will be responsible for thirty days tuition. If it is determined that the Zale Early Childhood Learning Center cannot accommodate the needs of your child, this contract may be terminated by the school and payment adjustment will be made.

I have read the above Cancellations and Withdrawals policy, registration procedures, payment procedures and completed the Arrangement for Payment form. I understand the Center's policy on school registration and agree to be responsible for payment of all fees due to the Adolph & Rose Levis Jewish Community Center. I understand that failure to make payment as required will result in termination of service.

PERMISSIONS

_____ I give permission to use photographs of my child and myself for use on the Zale facebook page and other marketing materials.

_____ I give permission for my name, telephone number and email address to be included in the class list that will be distributed only to parents in your child's class.

Signature (Parent or Guardian)

Date:

OFFICE USE

19-20 Class _____

19-20 Teacher Assigned _____

Entered in system _____



LEVIS JCC ZALE EARLY CHILDHOOD LEARNING CENTER 2019-2020 PRESCHOOL PROGRAMS

August 21, 2019 - May 21, 2020

Child's Name _____ Birthdate _____

SEPARATION CLASSES	TURNING TWO (birthdates 1/1/18 - 5/31/18)				
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
	<input type="checkbox"/>	Tues & Thurs	9:00 - 10:30 am until 12:00 pm after Dec	\$2,820	TT3700
	NEARLY TWO (birthdates 9/2/17 - 12/31/17)				
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
<input type="checkbox"/>	Mon-Wed-Fri	9:00 - 11:00 am until 12:00 pm after Dec	\$4,180	NT3710	
PRESCHOOL CLASSES	JUST TWO (birthdates 9/2/17 - 12/31/17)				
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
	<input type="checkbox"/>	Mon-Fri	7:30 am - 6:00 pm	\$17,894	JT3701
	<input type="checkbox"/>	Mon-Fri	9:00 am - 2:30 pm	\$12,600	JT3702
	TERRIFIC TWO (Age 2 by September 1, 2019)				
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
	<input type="checkbox"/>	Mon-Fri	7:30 am - 6:00 pm	\$17,271	TTW3812
	<input type="checkbox"/>	Mon-Fri	9:00 am - 2:30 pm	\$11,737	TTW3811
	<input type="checkbox"/>	Mon-Fri	9:00 am - 12:00 pm	\$9,148	TTW3808
	<input type="checkbox"/>	Mon-Wed-Fri	9:00 am - 12:00 pm	\$5,897	TTW3809
	THRIVING THREE (Age 3 by September 1, 2019)				
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
	<input type="checkbox"/>	Mon-Fri	7:30 am - 6:00 pm	\$17,443	TTR3807
	<input type="checkbox"/>	Mon-Fri	9:00 am - 2:30 pm	\$12,238	TTR3805
	<input type="checkbox"/>	Mon-Fri	9:00 am - 1:00 pm	\$10,560	TTR3804
	<input type="checkbox"/>	Mon-Wed-Fri	9:00 am - 1:00 pm	\$7,062	TTR3806
	PRE-KINDERGARTEN (Age 4 by September 1, 2019)			*All Pre-K tuition options receive a \$2,500 (approximate) VPK credit based on eligibility. Price listed does not reflect this credit.	
	CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)
	<input type="checkbox"/>	Mon-Fri	7:30 am - 6:00 pm	\$17,696*	PreK 3800
	<input type="checkbox"/>	Mon-Fri	9:00 am - 3:30 pm	\$14,728*	PreK 3803
<input type="checkbox"/>	Mon-Fri	9:00 am - 2:30 pm	\$12,862*	PreK 3802	
YEARLY PRE-CARE PROGRAM					
CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)	
<input type="checkbox"/>	Mon-Fri	7:30 am - 9:00 am	\$2,491	PCare 3874	
YEARLY AFTER-CARE PROGRAM					
CHECK	DAY	TIME	COST	CODE (FOR OFFICE USE)	
<input type="checkbox"/>	Mon-Fri	2:30 - 3:30 pm	\$1,765	ECASP3501	
<input type="checkbox"/>	Mon-Fri	2:30 - 6:00 pm	\$4,899	ECASP3502	
HOURLY DROP-IN RATE PRE-CARE AND AFTER-CARE PROGRAM					
Minimum 1 hour increments based on availability \$15/hour					

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LEVIS JCC ZALE EARLY CHILDHOOD LEARNING CENTER REGISTRATION 2019-2020 CONTINUED

PAYMENT INFORMATION: PAYMENT METHOD FOR FEES DUE AT TIME OF REGISTRATION

Date _____

Amount Paid \$ _____ Check # payable to Levis JCC Credit Card Below Please charge my credit card: Visa American Express Master Card Discover

Card # _____ Exp. Date _____ CVV _____

Name on Card _____ Billing Zip Code _____

Signature _____ Date _____

ARRANGEMENT FOR PAYMENT

I (we) agree to pay according to the selection indicated below. If choosing a monthly payment option, I (we) understand that I (we) will make 10 payments beginning June 1, 2019 to March 1, 2020. Initials _____

Child's Last Name _____ Child's First Name _____

Name of Person Responsible for Bills _____ Date _____

Address _____

City, State Zip _____

INDICATE YOUR CHOICE OF PAYMENT FOR TUITION:

 Payment in full by cash, check or EFT by June 26, 2019 (receive a 5% discount) Payment in full by credit or debit card by June 26, 2019 (receive a 3% discount) Monthly payment by bank draft (You must attach a voided check) Monthly payment by credit card Please charge my credit card: Visa American Express Master Card Discover

Card # _____ Exp. Date _____ CVV _____

Name on Card _____ Billing Zip Code _____

Signature _____ Date _____

Please note: The Levis JCC is only able to charge one credit/debit card or one bank account for all transactions. This includes the following: Early Childhood, Baby & Me, Summer Camp, Enrichment, Membership, etc. Initial _____

FOR STAFF USE ONLY

