



67 Kent Place Blvd.
Summit, NJ 07901
(908) 273-2015

Sheila Weisman
Terri Osit
Directors

APPLICATION FORM for SUMMER PROGRAM REGISTRATION
SUMMER 2010 – 6 Weeks June 21st – July 29th

PLEASE PRINT CLEARLY

Name of Child _____ Gender: Boy _____ Girl _____

Address _____

Age _____ Date of Birth _____ Home Phone _____

Father's full name _____ Bus. Phone _____

Mother's full name _____ Bus. Phone _____

Cell Phone (indicate Mother and Father's numbers) _____

SJCC Member? _____ E-mail address _____

How did you hear about us? _____

Please Indicate:

Class	Day	Time	SJCC Member Tuition / Deposit	Non-Member Tuition / Deposit
_____ Wee Two	W	9:30-11:00	\$130 / \$43	\$150 / \$50

Wee Two is for children 16-24 months accompanied by a parent or caregiver.

Class Subject to Enrollment
\$25 Sibling Discount will be applied to balance
Security Fee will be charged to all families new to the school

I am enclosing a **non-refundable deposit for 1/3 of summer tuition** (deposit will be returned if class is cancelled due to insufficient enrollment). Balance of tuition will be due May 15th. I understand class size is limited and enrollment is based on availability.

Parent/Guardian Signature _____ Date _____

Please drop-off or mail form along with check made payable to **SJCC Summer Program** to:
Sheila Weisman & Terri Osit, SJCC, 67 Kent Place Blvd., Summit, NJ 07901

*****PARENTS: PLEASE NOTE*****

NO CAMP ON MONDAY JULY 5th