

## SUMMER PROGRAM CONTRACT 2021

Please check off the choice that applies to your family:

   (a) The undersigned are the parents (or guardians) of this child, who is Jewish according to Jewish law (i.e., born of a Jewish mother). Should you have any questions pertaining to the religious status of your child because of adoption or conversion, we request that you discuss them with Rabbi Skolnik, the Rabbi of this synagogue.

   (b) The undersigned are the parents (or guardians) of this child, whose father is Jewish, but whose mother is not.

Child's Name \_\_\_\_\_ Child's DOB \_\_\_\_\_  

Last
First
Middle

Address \_\_\_\_\_ NY \_\_\_\_\_  

Apt #
City
Zip
Phone

Parent #1: \_\_\_\_\_ Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

Parent #2: \_\_\_\_\_ Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

**Emergency Contact:**

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Summer Program Session: June 28 - August 20, 2021 - **CLOSED MONDAY, JULY 5, 2021**  
 Monday through Friday 9:00am to 1:00 pm or 9:00 - 3:00pm  
**EARLY DROP-OFF 8:00 – 9:00 am & AFTER CARE 3:00 – 5:00 pm**  
 (minimum of 3 registrants required for early/after care)

<b>6 Weeks:</b>	3 Days 9am - 1pm <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> \$1,875	Tuition: \$ _____ Extended Hours: \$ _____ Less Discount: \$ _____ Less Deposit: \$ <u>600.00</u> BALANCE DUE: \$ _____
	3 Days 9am - 3pm <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> \$2,590	
	5 Days 9am - 1pm	<input type="checkbox"/> \$2,650	
	5 Days 9am - 3pm	<input type="checkbox"/> \$3,600	
<b>8 Weeks:</b>	3 Days 9am - 1pm <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> \$2,100	<b>8 Week Pricing for Extended Care</b> ( ) Early Morning Drop-Off 8am - 9am \$575 ( ) After Care 3pm – 5pm \$1,100
	3 Days 9am - 3pm <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	<input type="checkbox"/> \$3,025	
	5 Days 9am - 1pm	<input type="checkbox"/> \$2,940	
	5 Days 9am - 3pm	<input type="checkbox"/> \$4,200	

( ) FHJC Members receive a 5% discount

( ) Early Bird Discount – 3% off any 5 Day Program Through Friday, March 12, 2021 (Discount applied after member discount taken, if applicable)

**Registration Deposit: \$600 due with registration**  
 Non-Refundable & Non-Transferable  
 Total Payment due by Friday, May 14, 2021

The Forest Hills Jewish Center Nursery School reserves the right to terminate this agreement in its reasonable discretion when it deems such action to be necessary. In such an event, tuition will be refunded on a prorated basis minus the non-refundable registration fee.

Unless written notice to the contrary is received with this application, you hereby authorize the Forest Hills Jewish Center Nursery School to display pictures or images of your child in our school and in publicity materials.

**Placement:** The Forest Hills Jewish Center Summer Program has the right to place children in the appropriate group according to the month and year of the child’s birth. We cannot accommodate requests to change groups.

**Health:** No child can enter our Summer Program without a completed medical form and up-to-date vaccinations. Upon receipt of our registration form, we will send you a medical form. Please return the form by June 1, 2021. Please keep your child home when he/ she isn’t feeling well, both for your child’s protection and that of the other children.

**Emergency:** If emergency medical attention is necessary, and the parents cannot be contacted, the school shall have permission to call the family physician or, if he is unavailable, any other licensed physician to render necessary aid. If the parents cannot be reached by telephone, you expressly agree that permission and consent are given to the school to obtain proper emergency medical treatment for your child.

**The Undersigned:** The undersigned and the child shall abide by all of the rules and regulations of the summer program and shall pay all the fees and charges of the summer program as per the published schedule.

**Withdrawal:** Should it be necessary for any reason to withdraw your child, no such withdrawal shall relieve the undersigned from the obligation to pay the fees for the designated summer session. The deposit will not be refunded under any circumstances. The balance is refundable if the withdrawal is submitted in writing prior to May 15, 2021.

**Refund:** If there are closures during our Summer Program for COVID-19 related reasons a refund will be calculated on a pro-rata daily basis. Your refund will be calculated at the end of the Summer Program and your refund will be made after calculations can be completed. You will have the option to contribute your refund to FHJC, keep your refund as a credit for the following school year, or request a payment.

My signature below reflects that I have read both pages of this contract and that I agree to all the provisions therein. Please note that pasting in your signature or typing in your name on the signature line constitutes a valid signature.

Parent #1 Signature	Date	Parent #2 Signature	Date

  

Early Childhood Education Director’s Signature	Date

Full payment information is required at time of registration. Once this contract is completed and submitted, you will receive a call to provide your credit card payment information. If you are paying with multiple checks, all post dated checks must be received by the office for registration to be processed.

MasterCard [ ] Visa [ ] Discover [ ] Dated Checks [ ]

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ Security Code: \_\_\_\_\_

Payment Schedule: \_\_\_\_\_

For Office Use only



<b>Minimum registration is required to run all classes</b>
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