

School's Out...



School's Out...but the JCC is IN! When school is not in session, join us at the J for an active day of fun and entertaining supervised play. Spend time with old friends and meet new friends from other schools.

August 31

October 5, 8, 22

November 1, 5, 13, 16

December 21, 24

9:00 AM - 3:00 PM

Grades: Pre K - 5

\$55 per day members / \$65 non-members

BEFORE AND AFTER CARE

All campers **MUST** register for before care and/or after care if arriving before 9:00 AM or leaving after 3:00 PM. Snacks and activities are provided. *A \$1.00 per minute late fee per child is payable directly to the staff member who must stay with your child. Please note that after care ends at 5:00 PM on Fridays in observance of Shabbat.

BEFORE CARE

7:30 – 9:00 AM | \$10 day

AFTER CARE

*3:00 – 5:30 PM (5:00 PM on Fridays) | \$15 day

...and the JCC is in

To register, complete class registration form and submit to reception desk with payment.



Goldring-Woldenberg JCC - Metairie

3747 W. Esplanade Avenue Metairie, LA 70002

504.887.5158 | www.nojcc.org



School's Out Registration Form

FOR OFFICE USE ONLY:
 STAFF _____
 DATE _____
 INV # _____

One form per child. Download additional forms at www.nojcc.org.

_____ Member

_____ Non-member: How did you hear about us? _____

Child's Name _____ Grade _____

Male _____ Female _____ Age _____ Date of Birth: mm ___ dd ___ yyyy _____

Address _____ City _____ Zip _____

School _____

Parent/Guardian's Name _____ Email _____

Parent/Guardian's Phone: Primary _____ Secondary _____

Check the appropriate box(es) for your child's stay at the J.

DATE	School's Out \$55 per day members / \$65 per day non-members	Before Care \$10 per day	After Care \$15 per day
Friday, August 31			
Friday, October 5			
Monday, October 8			
Monday, October 22			
Thursday, November 1			
Monday, November 5			
Tuesday, November 13			
Friday, November 16			
Friday, December 21			
Monday, December 24			
TOTAL FEES	\$ _____	\$ _____	\$ _____
GRAND TOTAL \$			

No refunds, unless camp does not fill. Minimum enrollment is required.

Payment is required for registration. Spots cannot be held without payment. Please call to confirm receipt of registration forms that have been mailed or faxed.

METHOD OF PAYMENT (CIRCLE ONE) CASH CHECK No _____ AMEX VISA MC

CARD No _____ EXPIRATION DATE _____

SIGNATURE _____

Today's Date _____

Child's Name _____

Date of Birth _____ Current Grade _____

Emergency Information

ALL registrants must complete this form.
If you have already filled one out in **2018**, please disregard.

In the event of an emergency, contact: (list in order of preference, include parents/guardians)

Name of Parent/Guardian/Other Adult	Primary Phone	Secondary Phone	Relationship to child	JCC Member - Circle one
1.				yes no *
2.				yes no*
3.				yes no*
4.				yes no*
5.				yes no*

*Non-members, must sign in and show ID upon entering building.

In the event that any of these people cannot be reached, the JCC has my permission to contact my child's doctor and/or take any medical precautions that are necessary.

List any allergies your child may have:

Child's Doctor _____ Phone _____

Participation in any JCC activities and use of any recreational facilities involves a risk of accidental injury despite all safety precautions. Having been informed of the activities to be conducted by THE JEWISH COMMUNITY CENTER OF NEW ORLEANS, 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, defend and hold harmless (including the payment of attorney's fees) THE JEWISH COMMUNITY CENTER OF NEW ORLEANS, its officers, directors, independent contractors, volunteers and all employees for any illness, death or injury to me or my children or family members occurring during his/her/our participation in any activities or use of any recreational facilities at or conducted by THE JEWISH COMMUNITY CENTER OF NEW ORLEANS.

Parent's Name _____ Signature _____

(Please print)



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