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REGISTRATION FORM

PROGRAM YEAR 2019-20

First time participants, please contact Ali Landman at 561.852.3269 for an intake.

PARTICIPANT NAME	□ Male □ Female	Birthdate						
Participant Cell F	articipant Email							
School/Current Grade		Levis JCC Member □ Yes □ No						
Participant lives with: ☐ Both Parents ☐ Mother only ☐ Fathe	r only 🚨 Lives on their own	☐ Other						
Parent/Guardian Name								
Address	City	Zip						
Home #	Work #							
Cell #	Email							
Other/Parent Guardian Name								
Home #	Work #							
Cell #	Email							
Job Coach (if applicable)	Phone	Email						
Allergies								
Diagnosis								
Medication								
Family Physician	Phone							
Health Insurance Co.	Policy #							
SHIRT SIZE Fit & Fun Sports - Participant & Buddy T-shirt Size:_	(Youth S, M, L, XL / Adu	lt S, M, L, XL, XXL) 1 T-shirt each year						
EMERGENCY CONTACT								
Name	Phone	Relationship						
ADDITIONAL PERSON AUTHORIZED TO PICK-UP PARTICIPANT								
Name	Phone	Relationship Continued on next pag						

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REGISTRATION FORM PROGRAM YEAR 2019-20

REGISTRATION REQUIREMENTS PLEASE READ CAREFULLY BEFORE SIGNING

MEDIA RELEASE:

I hereby grant permission for the Levis Jewish Community Center to use the image(s) of my child/children or myself for a variety of purposes in print, video and digital media including (but not limited to) brochures, newsletters, videos, social media communications and digital images such as those on the Levis Jewish Community Center website as well as public relations outreach to local news media.

PARTICIPATION:

Date ___

Participation in any Adolph & Rose Levis JCC activity and use of any recreational facility involves risk of accidental injury despite all safety precautions. Having been informed of all activity to be conducted by the Adolph & Rose Levis JCC, 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 family members occurring during his/her/our participation in any activities or use of any facilities at or activities conducted by the Adolph & Rose Levis Jewish Community Center.

me or my children or family members occurring during his/her/our participation in any activities or use of any facilities at or activities conducted by the Adolph & Rose Levis Jewish Community Center. **MEDICAL RELEASE:** Upon enrollment as a participant or as the parent/quardian of a child in the Adolph and Rose Levis JCC, the undersigned authorizes the officials of the Adolph and Rose Levis JCC to act for the participant while in their care. This includes the power to authorize emergency treatment when it is deemed necessary and in the best interest of the participant. Signature ___ PAYMENT INFORMATION Split payment available upon request for Schwedelson Social Scene and Paul Markhoff Otzar Sunday School. Limited financial assistance available. It is understood that if the applicant decides to withdraw during the program, there is no refund for any unused portion of fees. The Levis JCC's Special Needs Department reserves the right to effect the withdrawal of a participant if, in the judgment of professional staff, said participant presents a safety risk to him/herself or others. In such event, any refund will be at the discretion of the Levis JCC Director of Special Needs. Please make check payable to Levis JCC or provide your credit/debit card information below and mail form to: Lainie Tantleff, Adolph & Rose Levis Jewish Community Center, 9801 Donna Klein Boulevard, Boca Raton, FL 33428 Or Fax to (561) 558-2111 or email lainiet@levisjcc.org Please check one: ☐ Amex ☐ Visa ☐ MC ☐ Discover ☐ Check Enclosed Amount enclosed _ Name on Card # ______ Exp. Date _____ CVV ____ Signature of Parent/Guardian _____ Billing Zip Code ____

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Adolph & Rose Levis Jewish Community Center

Helene & Roy Schwedelson Special Needs Department

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REGIS	TRA	TION FO	PRM PROG	RAM YE	AR 2019-20
JN SPORTS PROGRAM	1 (Ages 3-2	2+)			
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Fall 2019 (8 sessions)	3-12	Sundays	11:30 am - 1:00 pm	\$135	
Spring 2020 (5 sessions)	3-12	Sundays	11:30 am - 1:00 pm	\$100	
Spring 2020 (5 sessions)	12+	Sundays	1:30 - 3:00 pm	\$100	
UM ENRICHMENT PR	OGRAM (A	Ages 4-12)			
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Spring 2020 (6 classes)	4-12	Tuesdays	4:00 - 4:45 pm	\$50	
ENRICHMENT (Ages 4	1-22)				
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Fall 2019 (6 classes)	4-12	Wednesdays	4:30 - 5:15 pm	\$75	
Spring 2020 (6 classes)	12-22	Tuesdays	5:00 - 5:45 pm	\$75	
S NIGHT OUT & KIDS	NIGHT OL	JT (Ages 3+)			
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Year-Round (8 sessions)	3+	Saturdays	5:00 - 9:00 pm	\$100	
ARKHOFF OTZAR SUI	NDAY SCH	OOL PROGRAM (K	- 12th Grade)		
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
28 classes	K-12th	Sundays	9:00 - 11:00 am	\$750	
PAY PLAY AT THE J (Ag	ges 3+)				
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Year-Round (7 sessions)	3+	Saturdays	11:00 am - 2:00 pm	\$100	
OUT YOGA (Ages 16+)					
SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE
Fall 2019 (8 classes)	16+	Wednesdays	5:30 - 6:15 pm	\$125	
Wntr/Spr 2020 (8 classes)	16+	Wednesdays	5:30 - 6:15 pm	\$125	
'Ages 16+)					
	AGE	DAY	TIME	COST	FOR OFFICE USE
Fall 2018 (10 classes)	16+	Thursdays	6:00 - 7:00 pm	\$165	
Wntr/Spr 2019 (22 classes)	16+	Tuesdays & Thursdays	6:00 - 7:00 pm	\$365	
MINGLE ADULT FITM	IESS PROC	GRAM (Ages 16+)			
			TIME	COST	FOR OFFICE USE
	16+			\$165/\$140(m)	
		122.2.33		. ,	
Wntr/Spr 2020 (22 classes)	16+	Tuesdays & Thursdays	7:00 - 8:00 pm	\$365/\$315(m)	
	SESSION TYPE Fall 2019 (8 sessions) Spring 2020 (5 sessions) Spring 2020 (5 sessions) Spring 2020 (5 sessions) UM ENRICHMENT PR SESSION TYPE Spring 2020 (6 classes) ENRICHMENT (Ages 4 SESSION TYPE Fall 2019 (6 classes) Spring 2020 (6 classes) Spring 2020 (6 classes) Spring 2020 (6 classes) Spring 2020 (6 classes) SSIGHT OUT & KIDS SESSION TYPE Year-Round (8 sessions) ARKHOFF OTZAR SUI SESSION TYPE 28 classes AY PLAY AT THE J (Ages 16+) SESSION TYPE Year-Round (7 sessions) DUT YOGA (Ages 16+) SESSION TYPE Fall 2019 (8 classes) Wntr/Spr 2020 (8 classes) Ages 16+) SESSION TYPE Fall 2018 (10 classes) Wntr/Spr 2019 (22 classes)	SESSION TYPE AGE	SESSION TYPE AGE DAY	SESSION TYPE AGE DAY TIME	SESSION TYPE AGE DAY TIME COST Fall 2019 (8 sessions) 3-12 Sundays 11:30 am - 1:00 pm \$135 Spring 2020 (5 sessions) 3-12 Sundays 11:30 am - 1:00 pm \$100 Spring 2020 (5 sessions) 12+ Sundays 1:30 - 3:00 pm \$100 UM ENRICHMENT PROGRAM (Ages 4-12) SESSION TYPE AGE DAY TIME COST Spring 2020 (6 classes) 4-12 Tuesdays 4:30 - 4:45 pm \$50 ENRICHMENT (Ages 4-22) SESSION TYPE AGE DAY TIME COST Fall 2019 (6 classes) 4-12 Wednesdays 4:30 - 5:15 pm \$75 S NIGHT OUT (Ages 3+) SESSION TYPE AGE DAY TIME COST S NIGHT OUT (Ages 3+) SESSION TYPE AGE DAY TIME COST SPARCHOOL PROGRAM (K - 12th Grade) SESSION TYPE AGE DAY TIM

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REGISTRATION FORM PROGRAM YEAR 2019-20								
SCHWEDELSON YOUNG ADULT SOCIAL SCENE (Ages 18-29) additional weekend activity fees								
CHECK	SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE		
	Year-Round	18-29	Sundays	3-4 hours	\$335/\$225(m)			
	Summer	18-29	Sundays	3-4 hours	\$125			
M	onthly Schedules Sent							
Monthly Schedules Sent By:								
CHECK	SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE		
	Year-Round	30-50s	Sundays	3-4 hours	\$335/\$225(m)			
	Summer	30-50s	Sundays	3-4 hours	\$125			
М	onthly Schedules Sent	By: □ Em	nail 🔲 Regular Ma	il				
CAMP K	(AVOD - WINTER							
CHECK	SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE		
	All 8 Days	3-22	Dec 23-31, Jan 2-3	9:00 am - 4:00 pm	\$400			
REGISTRA	TION FOR INDIVIDUAL DAYS							
12/23	□ 12/24 □ 12/26 □ 12	/27 🗖 12/30	12/31 1/2	□ 1/3	\$60 per day			
CAMP K	(AVOD - SPRING							
CHECK	SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE		
	All 5 Days	3-22	March 23-27	9:00 am - 4:00 pm	\$250			
REGISTRATION FOR INDIVIDUAL DAYS - CHECK THE BOXES BELOW THAT APPLY								
□ 3/23	□ 3/24 □ 3/25 □ 3/26	□ 3/27			\$60 per day			
FIT & FI	JN SPORTS PROGRAM	TEEN VO	LUNTEED					
CHECK	SESSION TYPE	AGE	DAY	TIME	COST	FOR OFFICE USE		
	Fall 2019 (8 sessions)	14+	Sundays	11:30 am - 1:00 pm	N/A	100011102002		
	Spring 2020 (5 sessions)	14+	Sundays	11:30 am - 1:00 pm	N/A			
	Spring 2020 (5 sessions)	14+	Sundays	1:30 - 3:00 pm	N/A			
NOTES			Canady		1 4/7 1			
NOTES FOR OFFICE USE FALL WINTER SPRING SUMMER								
FALL		WINIER		SPRING		SOMMER		