



Today's Date	Child's First Name:	Child's Last Name	Date of Birth
<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> New application <input type="checkbox"/> Continuing student	Address:	
Desired start date:	City:	State:	Zip:
Family Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Custodial Parent: <input type="checkbox"/> Both <input type="checkbox"/> P/G 1 <input type="checkbox"/> P/G 2 <input type="checkbox"/> Other _____	
Parent/Guardian 1 (Full Name)		Primary Phone:	Date of Birth:
Email Address		Address (if different than the child's):	
Parent/Guardian 2 (Full Name)		Home Phone:	Date of Birth:
Email Address		Address (if different than the child's):	

ECC Monthly Tuition

Under 3	Full Days	Half Days
5 days/week	\$2081	N/A
4 days/week	\$1915	N/A
3 days/week	\$1436	N/A
2 days/week	\$958	N/A
Over 3	Full Days	Half Days
5 days/week	\$1477	\$1108
4 days/week	\$1352	\$1014
3 days/week	\$1014	\$761
2 days/week	\$676	N/A

*Tuition rate will change in the month after your child's third birthday

Schedule

Please indicate your desired schedule. Part-time? The more options you provide the better we can meet your needs:

Choice 1	M	T	W	Th	F
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choice 2	M	T	W	Th	F
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choice 3	M	T	W	Th	F
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Check this box for a half day schedule (only available for children over 3.)

Please select the block of time within which you would like your child to attend:

8am-5pm 8:30pm-5:30pm

8am-5:30pm extended schedule **if available**. (\$2/day additional fee applies)

If available we are interested in before or after care for an additional fee (TBD):

7:30am-8am 5:30pm-6pm



TERMS OF REGISTRATION

Read carefully before signing. This agreement signifies a financial commitment for the entire 2022-2023 school year. Refer to the school calendar on our website for all scheduled holiday and other closures.

Please initial each line:

_____ **New Applications only:** A \$100 application fee is due at the time of initial application. A \$500 deposit will be charged upon acceptance of a space. This deposit will be applied to your child's last month of enrollment. Applications will only be processed with the registration fee included. Enrollment will only be confirmed with payment of a deposit. All accounts must be current without an outstanding balance. Enrollment fee and deposit are refundable only in cases in which we are unable to offer space.

_____ JCC Membership is required for ECC enrollment: Membership enables you to participate in a wide variety of activities and programs the JCC sponsors. See www.jccannarbor.org for more information regarding membership. Annual membership will be billed starting at your child's first month of attendance.

_____ A 30-day written notification of withdrawal must be submitted to the ECC administration, no later than the first of the month of the expected withdrawal date. Less than 30 days' notice will result in an additional month charged to the account on file. **We will not be able to prorate tuition if leaving prior to the end of the month.** (With the exception of the transition point in mid-June)

_____ Any reductions made to a child's schedule after June 1, 2022 will be subject to a \$50 change fee for each time a change is made. A fee of \$50 is applied for the first schedule reduction. Fees increase by \$50 for each additional reduction. **All schedule reductions must be for a minimum of two calendar months.**

_____ If your child has a part-time schedule you may periodically add time as space permits. Drop-ins must be scheduled through the ECC office and are subject to availability. Fees: I/T: \$138/full-day. PS: \$105/full-day, \$80/half-day.

_____ On occasion, a child can "swap" a regular day of attendance for another day within the same week. This is subject to availability and will be charged a swap fee equal to 10% of the drop-in rate. This is applicable both in situations in which the JCC is closed on a child's regular day of attendance or if the swap is requested due to family scheduling. **Ability to swap days is not guaranteed; if a family needs to regularly take advantage of this service they should consider a schedule change. Swaps must be requested at least a week beforehand.**

_____ In the event of an emergency, I authorize the ECC Director or The J staff to act for me according to their best judgment. Payment for medical services is solely the family's responsibility.

_____ There are no deductions, credits, or refunds in tuition for days absent due to illness, VACATIONS, holidays, community/national emergencies, or program closures due to weather, natural disasters, or utility outages.

_____ A \$1/minute late pick-up fee will be assessed for any pick-ups after the end of the child's scheduled pick-up time.

I understand and agree to the terms of the registration listed above and I agree to be responsible for payment of all fees due to The J. This contract goes into effect once the application and payments have been processed. I understand that failure to make payments as required will result in termination of service and collection action will be taken. In the event that collection actions are taken, I understand that I will be responsible for any and all attorney and court costs incurred by The J. I hereby release to the fullest extent permitted by law, The J, its Board of Directors, officers, employees and representatives from any and all liability for any claims and causes of action for loss or damage to my child's property and for any and all injury and illness, including death, to my child that may result from or occur during participation in ECC activities.

Signature _____

Date _____

PAYMENT

I have submitted the non-refundable registration fee in the amount of \$100 and I have submitted the deposit to be applied to my child's last month of tuition in the amount of \$500.

Payment options:

- Autopay Option:** I have included a VOIDED check or Credit Card information and I acknowledge that the ECC will charge my bank account or credit card for the application fee and deposit. Use this account information for the monthly scheduled automatic payments on or near the first of the month until the end of the 2022-2023 school year, annual JCC membership, and any incidentals such as hot lunch and late fees.
- Monthly Option:** I have included credit card information and I acknowledge that the ECC will charge my credit card for the application fee and deposit. Please bill me for monthly tuition payments and incidentals. Payments made after the 5th of the month will be subject to a late fee.

Bank Information:	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings		
Credit Card:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> AMEX	<input type="checkbox"/> Discover
Bank Name (if applicable):				
Bank Account/Card Number:				
Routing Number (if applicable):				
Expiration Date:		CVV:		
Name on Account/Card:				
Signature:				