

REGISTRATION FORM

LAST NAME	FIRST NAME	MEMBER <input type="checkbox"/> YES <input type="checkbox"/> NO
STREET		HOME PHONE _____
CITY		CELL PHONE _____
STATE		E-MAIL _____
APT. NO.		
ZIP CODE		

Additional person(s) authorized to pick up child(ren)

Name _____ Phone # () _____ Relationship _____

Name _____ Phone # () _____ Relationship _____

If person picking up is not listed, you must send a note to instructor or call Lesley Surfer (561) 852-3212.

NAME OF PERSON TAKING THE CLASS	GRADE	AGE	ACTIVITY NAME	CLASS NO.	FEE

NEW LATE PICK-UP OPTION: PLEASE TRANSPORT MY CHILD(REN) BETWEEN ENRICHMENT CLASSES AND KIDFIT (ADDITIONAL \$60 FEE PER ENRICHMENT CLASS PER CHILD APPLIES.)

TOTAL AMOUNT DUE \$ _____

PLEASE CHECK ALL THAT APPLY	CHILD'S NAME	TEACHER'S NAME	ROOM #
<input type="checkbox"/> PLEASE TRANSPORT MY ZALE CHILD(REN) TO ENRICHMENT			
<input type="checkbox"/> I WILL TRANSPORT MY CHILD(REN) TO CLASS			
<input type="checkbox"/> PLEASE TRANSPORT MY CHILD(REN) BETWEEN KIDFIT AND ENRICHMENT CLASSES (ADDITIONAL FEE APPLIES.)			

PAYMENT INFORMATION PAID AMOUNT \$ _____ CHECK # _____

MC VISA AMEX DISCOVER EXP DATE _____ CARD # _____ SIGNATURE _____

PLEASE READ CAREFULLY BEFORE SIGNING

1. The Levis JCC reserves the right to make any class alterations or cancellations due to insufficient enrollment. In such cases, a full refund will be given.
2. Withdrawals are accepted up to one week prior to the class start date. A refund of 75% will be provided if sufficient enrollment of the class has been obtained at the time of withdrawal. Refunds will not be made once class has begun.
3. Tickets to events/trips are non-refundable and non-exchangeable.
4. 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 the activity to be conducted by the ADOLPH AND ROSE LEVIS JEWISH COMMUNITY CENTER 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 AND ROSE LEVIS JEWISH COMMUNITY CENTER, its officers, directors, independent contractors, volunteers and all employees for any illness or injury to me or any 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 AND ROSE LEVIS JEWISH COMMUNITY CENTER.
5. Members must remain members in good standing and remain current in all payments. Membership may be cancelled for violation of the general operating rules of the Adolph & Rose Levis JCC and Jewish Federation Campus. Inappropriate behavior will not be accepted. Refunds will not be issued for cancelled memberships.
6. I/ we understand that from time to time our pictures or our Family's picture may be taken in an Adolph & Rose Levis JCC program or activity. We understand and agree that these photos may be used for promotional materials, newsletters or brochures for the Adolph & Rose Levis JCC.

Signature (consent of parent or guardian) _____ Date _____

REGISTRAR: Barbara Goldstein (561) 852-3262 • Sports & Wellness Center, Friedberg Administrative Offices
FAX: (561) 558-2111 • **MAIL:** Levis JCC Registrar • 9801 Donna Klein Blvd. • Boca Raton, FL 33428