

Application For Summer Camp

)ame:					
Address:	Last		First	Middle	Hebrew
	Street Add			Phone: (City —
Date of Birth:		Zipcode Child's Age:		[Must be two years old as of 10/01/25]	
amily Informat	ion		-		
Parent Names:_					
lome Address (If Different fro	m Child's):			
Cell Phone: () -		e-mail:		
lease select th	e sessions you	ır child will be	attending and to	tal the tuition:	
Hours:	Price Per Session:	Session One: June 23rd-July 3rd *Closed July 4th	Session Two: July 7th-July 18th	Session Three: July 21st-August 1st	
9:00 AM - 12:00 PM	\$650				
9:00 AM - 2:30 PM	\$900				
	If your child wil	l be attending the entir	e summer there is a disco	unt:	
9:00 AM - 12:00 PM		00.00	9:00 AM - 2:30 PM	\$2,575.00	
	1	Single week of s	ession		<u> </u>
9:00 AM - 12:00 PM	\$35	Single week of s	9:00 AM - 2:30 PM	\$500.00	
Tuition Payment S Tayments: the first The properties to the color of t	Schedule: A \$300 st payment is du kindergan@mapicy Parent States er age by the NJ	0.00 O deposit is due the by April 7, 202 the by April 8, 202 the behavior of	9:00 AM - 2:30 PM at the time of regions. 5, and the final banter.org or by checonstant my child, nament of Health. I undo	stration. The rema lance is due by M ek made payable t d above, is up-to-o erstand that this is	ining tuition will be split into two lay 30, 2025. Payments can be o KinderGan Preschool. date on all immunizations required s a requirement for enrollment in the submitted at the time of camp
Tuition Payment S ayments: the first nade via Zelle to mmunization Polit or children his/ho linderGan prescho egisteration. Yes, my child is u lo, my child has	Schedule: A \$300 st payment is du kindergan@mapicy Parent State er age by the NJ sool. If a current ap-to-date on all a medical exept	O.00 O deposit is due the by April 7, 202 the by April 7, 202 the behavior of	9:00 AM - 2:30 PM at the time of regings: 5, and the final backer. at my child, name at my child, name at my child. I under the my healthform and immunization.	stration. The rema lance is due by M ik made payable t d above, is up-to- erstand that this is s do not have to b	lay 30, 2025. Payments can be to KinderGan Preschool. date on all immunizations required so a requirement for enrollment in the submitted at the time of camp
Tuition Payment S ayments: the first nade via Zelle to mmunization Polit or children his/ho linderGan prescho egisteration. Tes, my child is u no, my child has a rom my child's h Tou will be notific	Schedule: A \$300 st payment is du kindergan@map icy Parent State er age by the NJ ool. If a current a medical exeptive althcare provided on or before aght to add, cancel	O deposit is due to by April 7, 202 plewoodjewishce ment: I certify the State Department KinderGan studer on from one or other, and this confider, and this confider of the or blend class	9:00 AM - 2:30 PM at the time of regions, and the final banter.org or by check the final banter.org or by check the final bant of Health. I under the final bant new healthform and immunization. The forms to the CDC life the final bank the final bank the cDC life the final bank the final b	stration. The remalance is due by Make made payable to above, is up-to-cerstand that this is do not have to be ired immunizations at of valid exception; deponent.	lay 30, 2025. Payments can be to KinderGan Preschool. date on all immunizations required is a requirement for enrollment in the submitted at the time of camp s. I have attached official documentations.
Tuition Payment Sayments: the first ayments: the first ayments: the first ayments: the first and via Zelle to mmunization Polition Control of the control of	Schedule: A \$300 st payment is du kindergan@map icy Parent State er age by the NJ ool. If a current a medical exeptical thcare provided on or before a ght to add, cancoffer make-up of	o.oo O deposit is due the by April 7, 202 the by April 7, 202 the behavior of the behavior State Department KinderGan student O State require from one or report O State	9:00 AM - 2:30 PM at the time of regions, and the final backers, and the final backers, and the final backers, and the characters of Health. I under the communication of the co	stration. The remalance is due by Malance is due by Malance is due by Malance is up-to-cerstand that this is do not have to be direct immunizations at of valid exception; department. By your child.	lay 30, 2025. Payments can be to KinderGan Preschool. date on all immunizations required is a requirement for enrollment in the submitted at the time of camp s. I have attached official documentations.
Tuition Payment S Tayments: the first Tayments the first Tayments	Schedule: A \$300 st payment is du kindergan@map icy Parent State er age by the NJ ool. If a current a medical exeption and to add, canced offer make-up of have read and	O deposit is due to by April 7, 202 plewoodjewishce ment: I certify the State Department KinderGan studer on from one or or der, and this conference of the or blend classes for individual accept the above the state of the or the or the or	9:00 AM - 2:30 PM at the time of regings, and the final backer. Orgor by checker at my child, name at my child, name at my child, name at my child, name at me healthform and immunization. The forms to the CDC line a class is at risk of the class	stration. The remalance is due by Make made payable to above, is up-to-cerstand that this is do not have to be ired immunizations at of valid exception; deparent. By your child. Tefund and immediance immediance.	lay 30, 2025. Payments can be to KinderGan Preschool. date on all immunizations required in the submitted at the time of camp is. I have attached official documentations. The submitted at the time of camp is a required at the time of camp is a requirement at the time