

# LONG BEACH

# Before & After School Programs For Grades Pre-K to 5th 2022–2023

Friedberg JCC 15 Neil Court Oceanside, NY 11572 (516) 766-4341 • PH (516) 634-4195 • FX

afterschool@friedbergjcc.org

**@ West Elementary**91 Maryland Ave.

91 Maryland Ave. **AM + PM Program** 

@ Lindell Elementary 601 Lindell Blvd.

AM + PM Program

@ East Elementary 456 Neptune Blvd.

**AM Program Only** 

**@ Lido Elementary** 237 Lido Blvd.

AM + PM Program

### AM Only / PM Only - Monthly Tuition

# of Days	AM	<b>PM</b> to <b>5</b> pm*	<b>PM</b> to <b>6</b> pm*
3 Days	\$ 180	\$ 190	\$ 230
4 Days	\$ 200	\$ 210	\$ 260
5 Days	\$ 220	\$ 230	\$ 290

## **AM+PM - Monthly Tuition**

# of Days	<b>AM</b> + <b>PM</b> to <b>5</b> pm*	AM + PM to 6pm*
3 Days	\$ 320	\$ 360
4 Days	\$ 360	\$ 410
5 Days	\$ 400	\$ 460

- \*Additional <u>\$60 fee</u> per month for all <u>Pre-K</u> students enrolled in PM Only or AM+PM Care.
- > Sibling Discount is 10% off per child after the first.
- > A registration fee of \$60 will be charged per child upon enrollment (Non-Refundable).
- > Schedules must be consistent each week. No revolving or alternating days permitted.
- A \$10 Late Pick-up fee will be charged for every 15 minute period after designated time.
- First month's tuition will be charged per child upon enrollment. Auto-pay is required for monthly tuition via credit or debit card and is charged on the first business day of each month. Cash/Checks are not permitted. Please read all of the financial terms on the registration form.

#### **AM Before Care Program Details**

- •Starts at 7:00 A.M.
- •Drop-off no later than 8:15 A.M.
- Breakfast served daily. (nut-free program)
- •Games & activities.

#### **PM After Care Program Details**

- •Starts at dismissal up until 5:00 P.M.
- •Extended Care available to 6 P.M. (see charts)
- •Snacks served daily. (nut-free program)
- Counselors assist students with daily homework.
- Arts, crafts, activities, games, physical recreation.

For more information, contact the Registrar at

(516) 766-4341 Ext. 143

afterschool@friedbergjcc.org

Please return all completed registrations to afterschool@friedbergjcc.org or Fax (516) 634-4195

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# **LONG BEACH**

## **Before/After School**

# 2022 - 2023

## **Registration Deadlines and Start Dates**

If paperwork & payment is received by:	Child may start program week of:
Thursday, September 1	Tuesday, September 6 (1st day of school)
Thursday, September 8	Monday, September 12
Thursday, September 15	Monday, September 19
Thursday, September 22	Wednesday, September 28
Thursday, September 29	Monday, October 3
Thursday, October 6	Tuesday, October 11
Thursday, October 13	Monday, October 17
Thursday, October 20	Monday, October 24
Thursday, October 27	Monday, October 31

# FIRST DAY OF SCHOOL, WE STRONGLY RECOMMEND THAT YOU REGISTER IN ADVANCE.

The JCC receives a large volume of registrations at the beginning of each school year, and in order to ensure a safe and successful start for each child attending our programs, we need ample time between receiving your paperwork and the start date for processing. Forms received after 5:00 pm or over weekends and holidays will have a "received by" date of the following business day.

# LONG BEACH 2022-2023

## **Before/After School Program Registration**

Child's Last Name			First Name		Grade	
	e: f School is 9/6/22)	Date of Birth:	Teache	er's Name:		
Child Attends:	WEST SCHOOL	. LINDELL	EAST SCHO *Note: East Scl is an AM Progr	hool	DELEMENTARY	
	BEFORE	SCHOOL • AN	SCHEDULE • 3	Day Minimum		
-M:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	
	AFTER S	SCHOOL • PM	SCHEDULE • 3 D	Day Minimum		
<b>)</b> * PM:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	
( I will no	eed Extended Care	to: 6:00 PM	(Additional fees app	ly for Extended Care	e)	
Parent/Guardian	n 1		Cell #			
E-Mail		Alternate #				
Full Address/Tow	/n			Child's Pr	imary Residence 🗌	
Parent/Guardiar	1 2		Cell #			
E-Mail			Alternate #_			
Full Address/Tow	'n			Child's Pr	imary Residence	
Emergency Con	tact 1		Relation			
Phone(1) #			Phone(2) #			
Emergency Con	tact 2		Relation			
Phone(1) #	hone(1) #Phone(2) #					
Pick-Up Authori	zation List (The fo	ollowing people h	ave authorization to	pick up my chil	d)	
•			•			
•			•			
ALLERGIES (Write	e "None" if no known aller	gies)				
Does your child	require any medic	cations to be adn	ninistered during th	e program?	Yes No	
MEDICATION IN	IFORMATION					

# LONG BEACH **£** 2022-2023



I Accept

Date





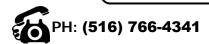
afterschool@friedbergjcc.org

## **Medical Authorization & HIPAA Authorization**

This authorization form is to be carried by the Program Director and will be used only in the event that we have
attempted to reach you and are unable to do so. This form is for emergency use only and will never be used
without first trying to contact you. In case of emergency, I hereby authorize the doctor or the hospital to which my
child may be brought (and whomever they may designate or their assistants) to perform any emergency
procedures/operations, to provide treatment, and/or administer anesthetics to my child.

procedures/operations, to provide treatment, and	/or administer anesthetics to my child.
I,(parent/guardian name) of _authorize any physician, nurse or health care provider to commor their designee(s) about my child's medical condition, treatme medical staff to discuss any medical conditions with the Prograstaff, in their sole discretion, believes such communication to be	ent, and/or prognosis. I further authorize the am Director or their designee(s) when the medical
Parent/Guardian Signature	Date
Parent/Guardian PRINT FULL NAME	
Topical Medication Author The JCC stocks antibiotic ointment and antihistamine creat treatment. I authorize these topical ointments to be applied du	m in the event that it is deemed an appropriate
Parent/Guardian Signature	Date
Photo Release (Open I hereby give permission for the Friedberg JCC and/or their demy child in the course of JCC programs and activities for pull and print, as well as on Social Media platforms including, but respectively.	esignees to use photographs (still and video) of blic media, brochures, emails/electronic messages
Parent/Guardian Signature	Date
Electronic Signature A By checking the "I Accept" box, you are signing this Agreement signatures on all of the above authorizations/releases are the I signature. By selecting "I Accept" using any device, means or conditions of this Agreement. You further agree that your signatyour "E-Signature") is as valid as if you signed the document in authority or other third party verification is necessary to validate certification or third party verification will not in any way affect to resulting agreement between you and the Friedberg JCC. You guardian authorized to enter into this Agreement.	nt electronically. You agree that your electronic legal equivalent of your manual/handwritten action, you consent to the legally binding terms and ature on this document (hereafter referred to as n writing. You also agree that no certification be your E-Signature, and that the lack of such the enforceability of your E-Signature or any

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FX: (516) 634-4195



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### **TUITION AND FEE SCHEDULE**

## 1st Month's Tuition plus \$60 Registration Fee per Child is Payable at Time of Registration.

## AM Only / PM Only Monthly Tuition

# of Days	AM	<b>PM</b> to <b>5</b> pm*	PM to 6pm*
3 Days	\$ 180	\$ 190	\$ 230
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\*Additional \$60 fee per month will be added for Pre-K students enrolled in PM Only or AM+PM Care. A 10% sibling discount is applied to each child after the first. Registration Fees are non-refundable and are not subject to sibling discount.

Child's <b>Last Name</b>	First Name	Grade
	PAYMENT INFORMATION	
Credit Card #	Exp Date	/CVV #
Card Holder Name	Signature	
fees are non-refundable). All tuition provided above on the first busine c \    @\}^\[A\] \[A\]	n payments thereafter will be automatically class day of each month. If your &&å/s /s /	harged to the credit or debit card you will be alerted via e-mail (A)
Parent/Guardian Signature		Date

Rcv'd \_\_\_\_\_ AM \_\_PM\_\_ Monthly\$\_\_\_\_ Start \_\_\_\_ 1st Mo\$\_\_\_\_ A/R\$\_\_\_\_ # of Mos.\_\_\_ 1st Draft \_