



The KinderGan
PRESCHOOL

Application For Summer Camp

Student Information

Date of Application: ___/___/___

Name: _____
Last First Middle Hebrew

Address: _____
Street Address City

Phone: (_____) _____ - _____
State Zipcode

Date of Birth: _____ Child's Age: _____ [Must be two years old as of 10/01/23]

Family Information

Parent Names: _____

Home Address (If Different from Child's): _____

Cell Phone: (_____) _____ - _____ e-mail: _____

Please select the sessions your child will be attending and total the tuition:

Hours:	Price Per Session	Session One: June 19th – June 30th	Session Two: July 3rd – July 14th <small>*Closed July 4th</small>	Session Three: July 17th – July 28th
9:00 AM – 12:00 PM	\$650.00			
9:00 AM – 2:30 PM	\$900.00			

If your child will be attending the entire summer there is a discount:

9:00 AM – 12:00 PM	\$1,800.00	9:00 AM – 2:30 PM	\$2,575.00
single week of a session			
9:00 AM – 12:00 PM	\$350.00	9:00 AM – 2:30 PM	\$500.00

Tuition Payment Schedule: 10% of tuition is due as a deposit at the time of registration. The first payment (50% of tuition) is due April 17, 2023. The tuition balance is due by June 8, 2023. Checks should be made to KinderGan Preschool.

Immunization Policy Parent Statement: I certify that my child, named above, is up-to-date on all immunizations required for children his/her age by the NJ State Department of Health. I understand that this is a requirement for enrollment in KinderGan preschool. If a current KinderGan student new healthforms do not have to be submitted at the time of camp registration.

- Yes, my child is up-to-date on all NJ State required immunization.
 - **Please submit a medical form if not currently enrolled in KinderGan Preschool**
- No, my child has a medical exception from one or more NJ State required immunizations. I have attached official documentation from my child's healthcare provider, and this conforms to the CDC list of valid exemptions

You will be notified on or before April 30, 2023 if a class is at risk of **cancellation** deposit and tuition would be refunded in full. We reserve the right to add, cancel or blend classes based on enrollment. We are unable to offer make-up classes for individual days missed by your child.

I have read and accept the above registration, refund and immunization policies.

Parent/Guardian Signature: _____ Date: ___/___/___

Total Tuition: \$ _____