



**CONGREGATION SONS OF ISRAEL
CAMP & NURSERY SCHOOL REGISTRATION
2019 - 2020**



CHILD 1

Name:	Date of Birth:
Please specify age group & days of attendance	
<u>Summer Camp 2019*</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<u>Nursery School 2019-2020</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	

CHILD 2

Name:	Date of Birth:
Please specify age group & days of attendance	
<u>Summer Camp 2019*</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<u>Nursery School 2019-2020</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	

CHILD 3

Name:	Date of Birth:
Please specify age group & days of attendance	
<u>Summer Camp 2019*</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
<u>Nursery School 2019-2020</u> <input type="checkbox"/> 2's <input type="checkbox"/> 3's <input type="checkbox"/> 4's Days of attendance: <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	

*Your child's summer camp age group is the same as the age group for the 2019-2020 school year.



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PARENT 1 INFORMATION

Name:		
Address:		
Home phone:	Cell phone:	Work phone:
Email:		
Occupation:		

PARENT 2 INFORMATION

Name:		
Address:		
Home phone:	Cell phone:	Work phone:
Email:		
Occupation:		

Who should receive program materials?	<input type="checkbox"/> Both parents	<input type="checkbox"/> Parent 1	<input type="checkbox"/> Parent 2
Present members of CSI?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Interested in becoming members?	<input type="checkbox"/> YES <input type="checkbox"/> NO

TUITION* AND PAYMENT SCHEDULE

**All fees are subject to approval of the budget which will be determined at the CSI Congregational Meeting to be held on June 25, 2019.*

<u>CSI Nursery School Summer Camp</u> Begins June 25 th , 2019	<u>CSI Nursery School</u> Begins September 2019	<u>Discounts</u> Please see Discount Eligibility Form for more information
<p align="center">\$200 deposit per child due with registration and 100% of total paid by the first day of camp</p> <p>2's, 3's and 4's Programs:</p> <p>5 days \$1885</p> <p>4 days \$1830</p> <p>3 days \$1775</p> <p>2 days \$1720 (available for 2's only)</p>	<p align="center">\$500 deposit per child due with registration <i>If you cancel by 8/15, \$350 of your deposit is refundable and if you cancel by 8/30, \$250 of your deposit is refundable</i></p> <p>Almost 2's TBA</p> <p>2's, 3's and 4's Programs:</p> <p>5 days \$6575</p> <p>4 days \$6450</p> <p>3 days \$6300</p> <p>2 days \$4700 (available for 2's only)</p> <p align="center">33% of total paid by September 1, 2019 66% paid by December 1, 2019 100 % paid by March 1, 2020</p>	<p>Available for both Nursery School & Camp:</p> <ul style="list-style-type: none"> • Synagogue Member Discount • Sibling Discount • New Family Referral Discount <p>Available for Camp only:</p> <ul style="list-style-type: none"> • Vacation Discount

Payments should be made by cash, check or ACH. 3% is added to all Credit Card payments.

PARENT SIGNATURE: _____

DATE: _____



**CONGREGATION SONS OF ISRAEL
CAMP & NURSERY SCHOOL
DISCOUNT ELIGIBILITY FORM
2019-2020**



Please complete the following. Discounts will be reflected on your tuition statement(s).

Parent Name(s):
Phone:
Email:

Please indicate eligible discount(s) and complete section(s) below.

Membership Discount

- If you are a CSI member, CSI will deduct \$150 from your tuition for each child enrolled in CAMP.
- If you are a CSI member, CSI will deduct \$1500 from your TOTAL NURSERY SCHOOL tuition.

Are you: Current member of CSI Interested in joining CSI for membership year beginning on July 1, 2019

Sibling Tuition Discount

- CSI will deduct \$100 from your tuition for each *additional* child enrolled in CAMP.
- CSI will deduct \$1000 from your tuition for each *additional* child enrolled in NURSERY SCHOOL.

Names of all children currently enrolled:

Name:	Age:	Enrolled in:	<input type="checkbox"/> Nursery School	<input type="checkbox"/> Camp
Name:	Age:	Enrolled in:	<input type="checkbox"/> Nursery School	<input type="checkbox"/> Camp
Name:	Age:	Enrolled in:	<input type="checkbox"/> Nursery School	<input type="checkbox"/> Camp

New Family Referral Tuition Discount

CSI will deduct \$100 from your tuition for each new enrolled family that has never been registered in CSI Camp or Nursery School and is not a CSI member.

Name of Referred Family:	Enrolled in:	<input type="checkbox"/> Nursery School	<input type="checkbox"/> Camp
Name of Referred Family:	Enrolled in:	<input type="checkbox"/> Nursery School	<input type="checkbox"/> Camp

Summer 2019 Vacation Tuition Discount *CAMP ONLY*

CSI will deduct \$100 from your tuition per full week of missed camp due to a planned vacation up to a maximum of **3** weeks of vacation. Vacation dates must be submitted in writing by June 15th.

Dates of vacation(s): (must be full weeks)

IMPORTANT NOTE: In the event that the planned vacation does not occur, you must reimburse CSI for the amount previously deducted. _____ Parent's initials

PARENT SIGNATURE: _____ **DATE:** _____