



**Before school/ Afterschool Program at The Calgary Jewish Academy
PROGRAM REGISTRATION - 2019 - 2020***

SUBSIDY SUPPORT IS NOT AVAILABLE FOR THESE PROGRAMS

CJA Student's Full Name _____

PRICES ARE FOR A 10 MONTH PERIOD. PLEASE CHECK WHERE REQUIRED

7:15AM - 8:15AM			3:30PM - 6:00PM		
1	Day	<input type="checkbox"/> \$ 400.00	1	Day	<input type="checkbox"/> \$1,500.00
2	Day	<input type="checkbox"/> \$ 800.00	2	Day	<input type="checkbox"/> \$2,140.00
3	Day	<input type="checkbox"/> \$ 1,200.00	3	Day	<input type="checkbox"/> \$2,775.00
4	Day	<input type="checkbox"/> \$ 1,600.00	4	Day	<input type="checkbox"/> \$3,415.00
5	Day	<input type="checkbox"/> \$ 1,760.00	5	Day	<input type="checkbox"/> \$4,050.00
Drop in Fee <input type="checkbox"/> \$10.00			Drop in Fee <input type="checkbox"/> \$35.00		

Check days required AM: ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

Check days required PM: ___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

*Registration for these programs are for September 2019 through to June 2020

\$120.00 per child per program refundable deposit to hold your spot.

Office Use Only:	Per Month:	Per Year:
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I hereby authorize The Calgary Jewish Academy to withdraw and issue payments on the first day of each month from September 2019 to June 2020 inclusive, for the purpose of paying for full year program fees.

My preferred method of payment is (please check one):

<input type="checkbox"/>	Visa*	_____	Expiry Date: _____
<input type="checkbox"/>	MasterCard*	_____	Expiry Date: _____
<input type="checkbox"/>	Automatic bank withdrawals each month (attach a void cheque to the PAD form and sign it)		

In the event that a payment is returned for any reason, I authorize The Calgary Jewish Academy to attempt to process the payment until full payment is made.

If cancelling you must provide two weeks written notice or you will be charged one month's full fee.

*** Each credit card payment will be subject to a 2.5% service charge.**

Initial
Initial
Initial

Name: _____ Date: _____

Signature: _____ Email: _____

Phone (Home): _____ Phone (Work): _____

Phone (Mobile): _____

Yes I am interested in a spot for the September 3, 2019 - to - June 2020 school year.

Child's Name _____ Child's Grade: _____

Parent's Name _____ Phone: _____

Email: _____

Please note this program requires a minimum of 12 participants between Kindergarten to Grade six and 8 participants between Nursery to Junior Kindergarten (3 and 4 year olds) prior to May 1 for this program to run.