## East Rutherford BEFORE AND AFTER SCHOOL CARE











## YOUR CHILD WILL LEARN AND GROW THROUGH...

**Activity Time** Snacks

**STEAM Projects** Free Time

Homework **Assistance** 

FULL TIME PRESCHOOL TO GRADE 5

OPEN TO STUDENTS WHO ATTEND SCHOOL AT MCKENZIE & FAUST
DOES NOT APPLY TO PART TIME PRESCHOOLERS

7:00AM - SCHOOL STARTS **BEFORE CARE: END OF SCHOOL - 6:30PM** AFTER CARE:



## 2022-23 EAST RUTHERFORD REGISTRATION

Complete form for each individual child and email to SACC@meadowlandsYMCA.org

Child Name			Last Name		_ Age	Gender 🖵 M / 🕻	⊒ F
Address					_ Date of Birth_		
City			, NJ Zip	Grade	e (as of 9/1/202	1)	
Parent/Guardian	Name				Date of Birth_		
Email							
					Date of Birth		
					Work Phone		
				YE OF THE WEEK			
D.o.	f C		PLEASE CHECK DAY		Char	nt Date	
					. —		
	ter eare		HOOL MONTHLY T				
#	Days		Child		Additional Child(ren)		
	5	\$2	201		\$181		
	4	\$186 \$165		\$168 \$149			
	3						
	_	-	47	\$133			
44		1	MONTHLY TUITIO		_	-	
#			<b>6:30</b> pm \$360	<b>4:30</b> рм \$285	<b>6:30</b>		
	4		\$333	\$263	\$30		
	3	\$259	\$297	\$234	\$26		
	2	\$230	\$264	\$201	\$23	9	
			FEES			PRICE	
						\$ 50	
	Before Care M BEFORE  # Days F  5  4  3  2  AFTER SCH  # Days 4:30 pm  5 \$316  4 \$292  3 \$259  2 \$230  Annual Registration none First Month Before Care First Month After Care Total Enclosed  SSISTANCE: Financial assistance apply for financial assistance of apply for financial assistance apply for financial assistance because Master Care  GEMENT: I understand to apply for financial assistance apply for financial assistance apply for financial assistance apply for financial assistance because Master Care  Assistance Financial assistance apply for financi					\$	
			ion			\$	
10	tal Enclo	sea				\$	
nembership. To app	oly for finand	cial assistance, plo understand that t	ease contact James Chia o attend before and af	ppone - Jchiappone@ tercare, tuition must t n time or \$18 fee will i	meadowlandsymca oe paid in full prio	a.org or to attending and m	y /
UTO PAY REQU n tuition due dates	IREMENT: s until 5/15.	l authorize the /23. I assume all ı	esponsibility to notify t	charge my RECURRING	MONTHLY TUITION any canges that r	ON to the payment me	ethod /
			PAYMENT N	METHOD			
□ Visa* □ Maste	erCard* 🗖 A	American Express*	□ Cash □ Check #	EFT Draft	t Checking 🚨 EFT	Draft Savings	
					Routing #Account #		
Credit Card Number	edit Card Number  Bank Name						
				Attach copy	of VOIDED check	or Bank Specification l	etter
Exp. Date	Secu	urity Code		Print Name	on Account		
Print Name as it appe	ears on Credit Car	d Sign N	lame as it appears on Credit Card	I *\$	2 fee per card trans	action starting Septemb	er 1st.