

JCC Program Scholarship Request Summer 2022

Parent Name _____

Child's Name _____ DOB _____

Please fill out **one form per child**. Each child may participate in **1 subsidized enrichment program per month**. **A new form is required for each registration.**

Gymnastics: (*Must complete Gymnastics Terms and Conditions. 50% payment required. Recreational levels only. **NO TEAM GYMNASTICS**) Registration is on a month-to-month basis. **Registration must be approved by Tammy Johnson, Gymnastics Director, prior to filling out this form.**

Summer classes for June: June 20-30: Level _____ Days _____ Time _____

Summer classes for July: July 1-29: Level _____ Days _____ Time _____

Summer classes for Aug: August 1-26: Level _____ Days _____ Time _____

Swim Lessons: (requires a \$5 deposit, 50% payment required, limited to (1) 2 week class registration at a time, registration dates apply.)

Circle One: 6/20-30 (Registration Opens 4/1) Level _____ Time _____
 7/5-14 (Registration Opens 6/27) Level _____ Time _____
 7/18-28 (Registration Opens 7/11) Level _____ Time _____
 8/1-11 (Registration Opens 7/25) Level _____ Time _____
 8/15-25 (Registration Opens 8/8) Level _____ Time _____

Sports Clinics: 50% Payment Required *Check with staff to see what clinics are being offered*

 Thank you for participating in YMCA programs!

******YMCA Summer Camps are not eligible for JCC Discounts******

I understand this request does not guarantee registration. Enrollment in programs is based on eligibility, available JCC subsidy funds and space in the program.

I understand that once the registration process is complete, I will be notified via email, and the billing method I have on file will be charged 50% of the monthly and session program fees and any applicable deposits.

I understand that should my JCC subsidized membership end, it is my responsibility to cancel any ongoing program registrations.

Parent/Guardian Name: _____ Signature: _____

Email: _____ Phone: _____

Date: _____ Staff Initials: _____