

Supervised Childcare Registration Form

For children ages 2- 12

COST:
\$10 per child per session

Registration Information

Please provide each child's name & age, and check the appropriate box for the sessions you need.

Child's Name	Age	Rosh Hashana Oct.3 10:30am - 12:30pm	Rosh Hashana Oct.4 10:30am - 12:00pm	Yom Kippur Oct.11 7:00pm – 9:00pm	Yom Kippur Oct.12 10:30am - 1pm	Yom Kippur Oct.12 .6:30pm-7:30pm	Total Due

Total Due _____

Parent Information

Parent's Name: _____	Cell Number: _____
Address: _____ City: _____ Zip: _____	
Email: _____	

PAYMENT MUST ACCOMPANY REGISTRATION

- | | | |
|--|--------------------|-----------------|
| <input type="radio"/> Check enclosed: \$ _____ | Credit Card: _____ | Exp Date: _____ |
| <input type="radio"/> Please charge the credit card you have on file for me. | | |

Mail form to:
Chabad of Gwinnett
3604 Parkmont Court
Norcross, Georgia 30092
Or Fax to 1-815-377-3672

Form is also available online at chabadofgwinnett.org.

Call 678-595-0196 if you have any questions.

