

# 2017 Summer Camp Payment Worksheet FCFC

Parent(s) Name(s) \_\_\_\_\_ JCC Membership Account # \_\_\_\_\_

THIS FORM IS TO BE **SIGNED** BY **ALL** FUNDING SOURCES OR MUST BE ACCOMPANIED BY DOCUMENTATION  
VERIFYING A FUNDING COMMITMENT.

[Examples could be **yourself**, School Systems, Agencies, philanthropic organization(s).]  
THIS FORM MUST BE RETURNED IN ORDER TO REGISTER

Fees from Registration Forms	Child #1	Child #2	Child #3	TOTAL
Subtotal Regular Camp Tuition	\$	\$	\$	\$
Subtotal Pre and Post Camp Fees	\$	\$	\$	\$
Subtotal All Camp Fees	\$	\$	\$	\$
Summer Membership Fee per Family	\$375.00			
Balance Due	\$	\$	\$	\$

## Payment information

Case Worker \_\_\_\_\_ Contact Number \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Total \$ \_\_\_\_\_

Authorized by – Signature \_\_\_\_\_

Date \_\_\_\_\_

I have read the JCC Membership & Program Terms & Agreements, authorize the JCC to process all charges agreed to on the 2016 Summer Camp Enrollment Form, and accept full responsibility in the case of non-payment of the amount specified, the undersigned agrees to pay all costs of collection.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_