

**SAN RAFAEL CAMPUS**

☐ **FINANCIAL AID:** I Intend to apply for Financial Aid. Applications due by FEBRUARY 15<sup>TH</sup> with completed tax return.  
APPLY HERE: [marinjcc.org/preschool](http://marinjcc.org/preschool)

Child's name \_\_\_\_\_

☐ M ☐ F Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone (work) \_\_\_\_\_ Cell \_\_\_\_\_

Phone (work) \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

How did you hear about our school? \_\_\_\_\_

**PRESCHOOL PROGRAMS**

These programs are 5 days only. Must be designated age by September 1<sup>ST</sup> of year enrolling.

- ☐ Nitzanim/Keshet 18 - 35 months  
☐ Aleph 3 years  
☐ Beyt/Gimel 4 - 5 years

**SUMMER PROGRAMS**

Check website for information.

**PAYMENT INFORMATION**

For NEW APPLICANTS ONLY, please include a one time, non-refundable administrative fee of \$100 per each new child.

Please check one:

☐ Check # \_\_\_\_\_ (Make check payable to OMJCC)

☐ Visa/MC # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

**CHOOSE SCHEDULE\***

Hours

9am–1pm

9am–3pm

8am–4pm

☐
☐
☐

\*Schedule options are contingent upon enrollment and not guaranteed.

**PRIORITY ENROLLMENT. CHECK ALL THAT APPLY.**

☐ Currently enrolled at the JCC Preschool

☐ Legacy Family Name: \_\_\_\_\_

☐ Current Osher Marin JCC member

☐ Parent works full-time for a Jewish Agency: \_\_\_\_\_

The Osher Marin JCC welcomes all individuals regardless of race, color, religion, gender, gender expression, national origin, disability or sexual orientation.

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

To submit your application, download and complete the pdf and email to: [hheffelfinger@marinjcc.org](mailto:hheffelfinger@marinjcc.org)