



TODDLER'S FANTASY FAIRYTALE



IMAGINATIONS SOAR!

Together you and I will escape together to the land of make believe through storytelling.

OCTOBER 14, 2021 - DECEMBER 16, 2021

EACH THURSDAY • 8 CLASSES TOTAL • \$144

(EXCEPT NOVEMBER 4TH & NOVEMBER 25TH)

at the **East Valley Jewish Community Center**

AGES 4: 3:15pm - 3:45pm

AGES 3: 3:45pm - 4:15pm

Please charge my Credit Card on file

Check No: _____

Parent's Name: _____

Cell #: _____

Date: _____

Signature: _____

Total Amount: _____

I have read and agree to the No Refund Policy below: *(Please initial)* _____
NO REFUNDS FOR SICK OR MISSED DAYS.

If you do not have a credit card/EFT on file at the JCC, you will need to fill out a Payment Option Form (available at the front desk) or you may chose to pay with another credit card or by check. Any declined cards will be charged a \$15 fee. I, the undersigned, understand that participation in any JCC activity involves a risk of accidental injury despite all safety precautions. Therefore, as a parent/guardian, I will assume all risk (injury & illness) for my child(ren) and family members that may occur during participation in any activities or use of facilities at the JCC. In case of sudden injury or illness, I hereby give authority to any hospital or doctor to render immediate aid as may be required at the time for my child's health and safety. I understand that any and all medical/dental expenses are my responsibility. I also authorize photographs to be taken and used privately and/or in JCC publications and the internet. By signing this form I acknowledge that I am aware of the potential risks of participating in activities and/or programs at the JCC and agree in no way to hold the management, agent, or employees of the JCC liable for any injury I/my children may sustain.

I have read and agree to the above policy. _____ initials