



# CLASS REGISTRATION

Mail to JCCNS, 4 Community Road, Marblehead MA 01945 or Fax to: 781-631-8181  
 or REGISTER ONLINE AT: WWW.JCCNS.ORG

FAX IN     MAIL IN     DROP OFF    Time of Day: \_\_\_\_\_ AM PM

Participant's Name \_\_\_\_\_

Address \_\_\_\_\_ email \_\_\_\_\_

City, ST, Zip \_\_\_\_\_ Day Tel # \_\_\_\_\_

Night Tel # \_\_\_\_\_ Cell # \_\_\_\_\_

If under 18, Parent Name (Last, first) \_\_\_\_\_

Age of Child \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Emergency Contact: Home # \_\_\_\_\_ Work/Cell # \_\_\_\_\_

JCCNS Member # \_\_\_\_\_ Community Access # \_\_\_\_\_

Class Title	Day/Time	Session	Fee

Name on charge card \_\_\_\_\_

Visa/MasterCard # \_\_\_\_\_ Exp. \_\_\_\_\_

For Office Use Only: <input type="checkbox"/> Check <input type="checkbox"/> Cash	Date _____	Batch # _____
Trans # _____	Receipt # _____	Entered by _____

**Refunds or Cancellations**  
 You will be notified if we are unable to offer a class or activity. Full refund will be given if the JCC cancels a class/activity because of insufficient enrollment. If you cancel prior to the beginning of the class, you will receive a full refund less a \$10 processing fee. Refunds will be credited to your account if there is a balance due.  
**NO REFUNDS WILL BE GIVEN AFTER THE FIRST DAY OF CLASS.**  
 The JCC is unable to refund tickets and/or reservations for Center trips and programs. Thank you for your cooperation.