Enroll in the Early Education Center at the Boys & Girls Club of Wayne and give your child the opportunity to grow and learn in a fun and educational setting. We offer a safe environment with a caring and professional staff to meet all your child's needs.



Our center is open to children ages 6 weeks to 5 years old and they are separated by age into one of five large classrooms. During our curriculum based school day, taught by certified teachers, we offer a range of educational activities so each child is engaged and actively learning. Children will learn through many age appropriate activities including but not limited to computers, art, science, math, phonics, dramatic play, indoor & outdoor play. We have themed months that are packed with fun activities!

Please see inside for hours and fees. Our school year runs from September to June.

Pre-K Summer Camp is a separate program that runs weekly for July and August. Registration for Summer Camp 2025 will be available in February.

For more information or a tour of our facility please contact Gladys Pirruccio or Jenni Mendel at 973-956-0033 gpirruccio@bgcnwnj.org jmendel@bgcnwnj.org



Early Education Center 2024-2025



Boys & Girls Clubs of Northwest New Jersey Wayne Unit

6 Weeks— Pre-K4
Space limited!
Register today!!

2024-2025 Early Education Center Enrollment Application *A copy of Immunization Records and Universal Health Records are due prior to starting our program*

Child's Name:		Date of Birth:				
Address.						
City:	State:	Zip:	Sex:			
City: Primary Phone:() 1				
1 1111111		,				
Ethnicity: African American	n Asian	or Pacific Islander	Hispanic			
Multiracial	Native Ameri	can White	mspame			
widitiiaciai	Native Ameri	can wintc				
How did you hear about us	.9					
Social MediaFriend/Fam	ily Commu	nity Marketina O	nlina Navys Other			
Please include family/friend	myCommu	anthorite thom.	illille News_Othel_			
riease include failing/iriend	name so we	can mank mem				
Parent/Guardian Informat	tion.					
		tionahin to ahild.				
Name:	Kelai	nonship to child:				
Email						
Business Name & Address:						
Business Phone:	Cell phone:					
Name:	ne & Address:Cell phone:Relationship to child:					
Email						
Business Name & Address_						
Business Phone:	ess Name & AddressCell phone:					
*Please note:						
There are no refunds or cred	its for vacation	ons, quarantining or	sick absences.			
		, 1				
Marital Status: (please che	ck one)					
Married Separated	Divorced	Widowed	Single			
1			0			
Persons authorized to pick	up child oth	er than mother an	d father listed above			
Name:Relationship to child:		Relationship to child	1.			
Phone:		Phone:	**			
Thone.	1	none.				
If there is a person(s) who ca	annot nick un	your child due to co	ourt order please list			
below and supply document	ation to Direc	tor	suit order please list			
below and supply document	ation to Direc	λίοι.				
Child's Doctor						
Address:						
Phone:	· · · · · · · · · · · · · · · · · · ·		414			
re there any conditions or sp	ecific needs,	mental or physical,	that require special			
attention?						
Allergies or Medical condi	tions?					

Hours & Fees Per Month

\$100 Registration Fee non-refundable

Please circle below which program/payment you will be using

Infant 6 weeks-15 months	5 days	3days]	
7:00 AM-7:00 PM	\$1,235	\$1,095		
Toddler 16m-27m	\$1,105	\$965		
2 Year Old Class 28 months—36 months	5 Days	3 Days	Before Care 7-9	After Care 3:30-6:30
7:00 AM-7:00 PM	\$1,030	\$890	Included	Included
9-3:30	\$890	\$750	\$150	\$170
3 Year Old Class must be 3 by 10/15/24 4 Year Old Class must be 4 by 10/15/24	5 Days	3 Days	Before Care 7-9	After Care 3:30-6:30
7:00 AM-7:00 PM	\$1,015	\$875	Included	Included
9-3:30	\$875	\$735	\$150	\$170

Please circle days if using 3 day program M T W TH F

Image Release

As the parent/guardian of the above named child I do irrevocably assign and grant unto the Boys & Girls Club of NWNJ the immutable and unconditional right and permission to use my child's name, likeness, voice and/or image for the purpose of producing an audio/video/photograph/film and/or printed material including the right and permission to copyright, use, produce, and/or publish said audio/video/photograph/film and/or printed material at the sole discretion of the Boys & Girls Club of NWNJ. I further waive any and all right to inspect and/or approve any a video/photograph/film and/or printed material that may be published/distributed and/or otherwise utilized as deemed appropriate by the Boys & Girls Club of NWNJ.

PLEASE CHECK ONE:

 $\hfill\Box Yes,$ I give my full consent on behalf of said minor.

 $\square No$, I do not give my consent on behalf of said minor.

I hereby give consent for my child to participate in the Boys & Girls Club of NWNJ. I assume all risk in regard to participation in this and any other Boys & Girls Club program in which my child may participate. I release, indemnify and agree to hold harmless the Boys & Girls Club of NWNJ its directors, officers, coaches, and volunteers from any liability that may result from participation in Boys & Girls Club activities.

By my signature, I attest to the following: That the above information is correct. That in the event of a medical emergency, I authorize the Boys & Girls Club of NWNJ to seek emergency medical care for my child as deemed necessary by the Director.

Signature of Parent or Guardian Date