



Name: _____

Date of Birth: _____ JCC Membership Number: _____

Email: _____ Phone: _____

Name of Gift Recipient: _____



- 5 one-hour sessions for MEMBERS ~~\$435~~ \$348 (save \$87!)**
 _____ # for self _____ # as gift for member
 - 10 one-hour sessions for MEMBERS ~~\$840~~ \$672 (save \$168!)**
 _____ # for self _____ # as gift for member
 - 5 one-hour sessions for Non-MEMBERS ~~\$522~~ \$417.60 (save \$104.40!)**
 _____ # for self _____ # as gift for member
 - 10 one-hour sessions for Non-MEMBERS ~~\$1,008.00~~ \$806.40 (save \$201.60!)**
 _____ # for self _____ # as gift for member
- _____ **Total amount owed**

How did you hear about this offer?

Email _____ JCC Staff

Social Media _____

JCC Website _____ Other

Flyer/poster _____

Coach requested _____

I am a new client

Help me find a Coach

I wish to use the following method of payment:

Check made payable to Kaplen JCC on the Palisades VISA MC AMEX Charge Card on File

CC Number: _____ Exp date : _____ CCV: _____

Name on card: _____ Signature: _____

Billing Address: _____ City, State, Zip: _____

I authorize the Kaplen JCC on the Palisades to charge the credit card indicated on this form. This is a one-time authorization that will be charged on or after 11.26.21 for the purchase of Basketball lessons for the total amount indicated above.