

OPT IN FORM

All kindergarten students attending a public school in Hopatcong are automatically enrolled in the Learn to Save, Save to Learn college savings program. This Opt In form is only for those families who have elected not to share their student’s directory information, which thereby excluded him or her from being included in the college savings program and receiving a $50 initial contribution to their own college savings plan account.

If you would like your child to participate in this program please use this form to provide the necessary information needed to establish his or her account.

I am submitting this Opt In Form and thereby agreeing to allow the following information to be used by the Community Foundation of New Jersey and Investors Bank to establish and maintain a college savings account in his or her name.

Student’s Name:

Student’s School:

Parent/Guardian Name (please print):

Student’s Mailing Address:

Parent/Guardian email address:

Parent/Guardian phone number:

Parent/Guardian Signature:

Completed form may be delivered to any of the following addresses:

Via Email info@cfnj.org

Via Fax (973) 267-2903

Via Mail Community Foundation of New Jersey

 Attn: LSSL Program

 PO Box 338

 Morristown, NJ 07963-0338