

TEMPLE SHALOM PRESCHOOL

2024-2025 INFANT REGISTRATION FORM

TENII EE SIIAI	ZOWI I KESCHOO		2024-20)23 INFAN	REGIS.		1011	TORM	
Child's Name: Parent 1 Name: Parent 2 Name:]	Phone:		_ Email:			F	
Address: Yes No			City:	State:		Zip:			
Temple Shalom Mer	mber? Yes	No	•				•		
ALL CHILDREN MUST BE IMMUNIZED. Temple Shalom Preschool must have a copy of your child's Florida Physical and Immunization forms ten days before their start date for them to attend school. Medical exemptions and delays are accepted with proof of paperwork, but religious exemptions are not accepted.									
Payments and Discounts									
beginning July 1, 2024. *Credit and Debit card service fees apply. Payment Plan Options: 1) Two semester payments 2) Ten monthly installments. Annual tuition reflects a 10% discount if paid in full by July 1, 2024. Semester tuition reflects a 5% discount. Temple Shalom members receive a \$500 tuition discount per child. Families with multiple children registered will receive a \$500 discount per family.									
	Monday	Tuesday	Wednesday T		nursday		Fri	day	
5 Days (M-F)	7:30-5:30	7:30-5:30	7:30-5:30		30-5:30		7:30	-5:30	
Please select one of the payment options listed below: \$1,640/10 Installments\$7,790/Semester\$14,760/Annual									
ALL FEES ARE NON-REFUNDABLE				<u>FEI</u>	<u>ES</u>	OFF	TCE U	SE ONLY	
\$400.00 INFANT REGISTRATION FEE (starting February 1, 2024) SUPPLY FEE (select one):\$475/Annual\$240/Semester\$55/Installment SECURITY FEE (select one):\$475/Annual\$240/Semester\$55/Installment				Due with 1st Tuition Payment on July 1 Due with 1st Tuition Payment on July 1					
CC/ACH (Brightwheel) Check Enclosed				•					
Terms of Agreement All tuition and fees are non-refundable (including registration). We require 30 days written notice if you decide to withdraw your child(ren) at the end of the school year. I understand and agree to the terms and requirements stated on this form.									
Parent 1 Signature (required):					Date:				
Parent 2 Signature (r	equired):				Date:				