

TEMPLE SHALOM PRESCHOOL

2023-2024 INFANT REGISTRATION FORM

Child's Name:			DOB:		Gender:	M	or	F
Parent 1 Name:		l	Phone:		_ Email:			
Parent 2 Name:		l	Phone:	Ctata	_Email:	7		
Auuress: Temple Shalom Mer	mber? Yes	C No	nty:	State:		Z	ıp:	
	N MUST BE IMM sical and Immuni	-					-	
		Tuition Paymen	nts and Sched	lul <u>e</u>				
Tuition charge	s will be added to y				aid by cred	lit car	d, che	eck or
ACH beginning	g July 1 st , 2023. Pa	yments may be ma	de annually, o	quarterly or	in 12 mon	thly i	nstallı	nents.
Annual tuition ref	flects a \$250 discou					rd ser	vice fe	es appl
	Temple Shalor	m members receive	a \$500 tuition	n discount pe	er child.			
	Monday	Tuesday	Wednesd	ay Tl	nursday		Fri	day
5 Days (M-F)	7:30-5:30	7:30-5:30	7:30-5:30 7		30-5:30		7:30	-5:30
Please select one o	f the payment optic	ons listed below:						
	F							
\$1,6	00/12 Installments	\$4	1,800/Quarterly	•	\$1	8,950	/Annu	al
AL	<u>FEES</u>		OF	OFFICE USE ONL				
\$300 - INFANT REGISTRATION FEE								
	Duo with 1	st Tuition						
SUPPLY FEE: \$550/YEAR or \$50/MONTH (select one)				Due with 1 st Tuition Payment on July 1				
SECURITY FEE: \$550/YEAR or \$50/MONTH (select one)				Due with 1	st Tuition			
CC/ACH (Brightwheel) Check Enclosed				Payment	on July 1			
CC/	ACH (Brightwheel) Check En	closed					
TOTAL DUE WITH THIS FORM:								
			Agreement					
	e non-refundable. We							
the end of th	e school year. I und	erstand and agree t	to the terms a	nd requirem	ents stated	on th	is for	n.
Parent: Signature:				Date:				
					Date.			