



Temple Judea Nursery School New Student Registration Form

Child's name _____ Gender _____ Birthdate _____

Address _____

City _____ Zip _____ Home phone _____

Parent's name _____ Cell phone _____ E-mail _____

Parent's name _____ Cell phone _____ E-mail _____

Parents are: ☐ Married ☐ Divorced ☐ Separated ☐ Widowed Child lives with _____

Please enroll my child for the class beginning:

☐ Fall 2019

☐ Spring 2020

☐ Summer 2020

☐ Fall 2020

☐ Spring 2021

☐ Summer 2021

Please select day option:

☐ 3-day option-9am-12pm (Monday/Wednesday/Friday)

☐ 3-day option-9am-1:30pm (Monday/Wednesday/Friday)

☐ 5-day option-9am-12pm

☐ 5-day option-9am-1:30pm (Mandatory for Intermediate and Gesher Children)

All children must be at least 2 years old by the first of the month their Nursery School semester begins (9/1 for Fall; 2/1 for Spring and 6/1 for Summer).

A deposit of **\$500** is required to hold your child's spot. \$300 of this is a **non-refundable** one-time only registration fee and \$200 will be applied to tuition. Temple Judea membership is required to enroll your child in our Nursery School.

Parent's Signature _____ Date _____

Name on Credit Card _____

Credit Card Number _____

Expiration Date _____ Security Code (CVC) _____

Billing Address (if different from above) _____

For office use only:

Date rec'd _____ Amount \$ _____ Conf Ltr sent _____ Finance Process Date _____