



The Kenneth and Harriet Kasselmann Early Childhood Learning Center
In the Morris and Yetta Deckelbaum Wing
1400 N. 46th Ave. Hollywood, Fl. 33021 Office: 954-987-1694 Fax: 954-987-2731

Infant & Mobile Infant Registration 2009- 2010 / 5769 - 5770

Date: _____ Temple Sinai Member: ___Y ___N

Member of another synagogue: ___Y ___N

If yes, which one: _____

Child's Name: _____ Gender: M ___ F ___

Child's Hebrew Name: _____

Child's Primary Address: _____

Billing address if different than above: _____

City: _____ State: _____ Zip: _____

Parent(s) Name: _____

Guardian(s) Name: _____

Person(s) responsible for billing: Both ___ Mom ___ Dad ___ Guardian ___ Other ___

Child's Birth date: _____

Start Date: _____

(for office use only)..... End Date: _____

Phone Numbers:

Home: _____ E-mail Address: _____

Mom/Guardian Work #: _____ Mom/Guardian Cell #: _____

Dad/Guardian Work #: _____ Dad/Guardian Cell #: _____

New Student Registration Fee: \$250.00

Five Full Days:

- Temple Sinai Members [] \$850/monthly 8 a.m. - 6 p.m.
Non-Members [] \$955/monthly 8 a.m. - 6 p.m.

Reminder: We close at 5 p.m. on Fridays from November 1st through March 12th due to early candle lighting times.

_____processed by _____Date

REGISTRATION PROCESS POLICIES

- This registration form must be completed and signed for each student. The non-refundable registration fee must accompany this form in order to secure placement.
- **First and last month tuition is due before your child begins the program.**
- School registrants must be in good standing financially with Temple Sinai. This includes current Early Childhood tuition fees. Camp Re-Im fees and any other financial obligations to Temple Sinai.
- Students whose tuition is in arrears will not be permitted to return to school until your account is made current. Temple Sinai reserves the right to cancel the enrollment of any student for non-payment. A \$35 fee will be assessed for returned checks. A \$25 late fee will be assessed to payments made after the 15th of the month.
- Upon receipt of this registration form, a space is reserved for your child. You will receive a packet of all the necessary, required forms. Children will be admitted in to class when we have received all required forms and your child's file is complete and current, pursuant to DCF & NAEYC regulations.
- Temple Sinai reserves the right to cancel students' enrollment or dismiss any student/family whose conduct, influence and/or behavior is deemed unsatisfactory and not in the best interest of the school or synagogue.
- One month's written advance notice is required to withdraw a child from the ECE program without financial penalty. If one month's notice is not given, your last month's tuition will not be refunded.
- There is no tuition adjustment or credit given for holidays, family vacations or illness.
- Children are placed in classes at the discretion of the school administration.
- When your child turns 18 months, a new registration form is required. Please note the pricing and hourly changes.

Tuition Reduction Qualifier:

_____ 5% sibling discount on least expensive tuition

PLEASE CHOOSE ONE OF THE FOLLOWING PAYMENT OPTIONS:

_____ I hereby authorize Temple Sinai of Hollywood to charge my VISA/MC on the 1st day of each month. If the first day of the month falls on a non-business day, the card will be debited on the last day prior to the 1st. **I understand that it is my responsibility to notify Temple Sinai of Hollywood when/if the card is no longer valid.** This authorization will be in effect until written notice is received by Temple Sinai from me to cancel further notice.

(PLEASE COMPLETE ATTACHED CREDIT CARD INFORMATION FORM) This information will be given to the bookkeeping department ONLY for security purposes.

_____ I will turn in to Temple Sinai post-dated checks with my tuition agreement for the amount of anticipated months my child will enrolled in the Infant/Toddler Program. (Number of checks turned in to be determined by parent and ECE Director.)

By signing this application, I have read this entire registration form and understand the policies stated. I/We agree to adhere to them.

Parent's Signature: _____

For Office Use Only:

Received by: _____ Date _____