



Early-Drop Off Registration

Name: _____

Child's Age: 2 yrs. 3 yrs. 4 yrs. 5 yrs.

Early drop-off is an option for Keshet 2019-2020. We will require enrollment of at least two children per morning in order to offer the service at the cost below. You can sign up for it by day or for the whole week. The charge is based on the actual number of days for this service. The cost can be added to your tuition payments or paid separately. Once committed for the semester, you will be charged. There cannot be any refunds. If circumstances change during the school year, please see Mandi Warner to seek a change in the schedule. Please note that there needs to be at least 24 hours' notice to add a day of early drop off. There will be a \$20 charge per day added for last minute requests.

Please check your choice(s):

Fall 2019, \$15/day

	M (\$180)	T (\$165)	W (\$150)	Tr (\$210)	F (\$225)	Mon > Fri (\$630)
7:30-9:00 am						

Fall Session Total: \$ _____

Spring 2020, \$15/day

	M (\$300)	T (\$330)	W (\$360)	Tr (\$285)	F (\$270)	Mon > Fri (\$1200)
7:30-9:00 am						

Spring Session Total: \$ _____

NEW ITEM: Early Drop Off Punchcard!



For those mornings when you realize you have an appointment, or when your child wakes up full of energy, Keshet is here for you! This \$200 punch card, valued at \$300 (or your own time and peace of mind), is for you to use when you need a last-minute early drop off. It is good until June 30, which means it can be carried over the first few weeks of camp! The EDO staff will keep it on hand and punch it whenever you need to drop off your child last minute.

I would like to purchase (#) _____ punch cards! Total: \$ _____

Return to the school office ASAP with your registration papers

Check the appropriate box below to indicate your method of payment:

Separate payment is enclosed

I would like to have the charge amount added into my tuition payments.

Parent signature _____

Date _____



Rainbow Connection

Fall Session: September 4, 2019 – December 20, 2019
 Spring Session: January 6, 2020 - June 16, 2020

Name: _____

Child's Age: 3 yrs. 4 yrs. 5 yrs.

Lunch Bunch and Enrichment options are offered for Keshet Fall 2019. Lunch Bunch takes place between 12:00-1:00pm Monday through Friday. Enrichments take place 1:00-2:00pm Monday through Friday. Sign up for LB and/or one (or more) enrichments below and submit this form to the School Office. Please note, you receive a discount for signing up for the whole week (priced already below).

Lunch Bunch (12-1pm), \$9 a day

Enrichment Class (1-2pm), \$13 a day

- | | |
|------------|--|
| Monday: | Fall: <i>STEAM</i>
Spring: <i>Sensory-based Science</i> |
| Tuesday: | Fall and Spring: <i>Butterfly Kids Yoga</i> |
| Wednesday: | Fall: <i>Passport to Adventure with Morah Gail – Come travel around the world! Learn about a new country each week through art, cooking, and other fun activities!</i>
Spring: <i>Famous Artists</i> |
| Thursday: | Fall and Spring: <i>Sporty Sprouts</i> |
| Friday: | Fall and Spring: <i>Jewish Summer Camp throughout the whole year! Come experience a year's worth of camp songs, arts and crafts, "trips" to Israel, Hebrew vocabulary learning, and Israeli dancing!</i> |

Please circle your choices:

9/4/2019-12/20/2019	M	T	W	Tr	F	ALL
Only Lunch Bunch	\$108	\$99	\$90	\$126	\$135	\$522
Lunch Bunch & Enrich.	\$246	\$242	\$220	\$308	\$330	\$1262
1/6/20-6/16/20	M	T	W	Tr	F	ALL
Only Lunch Bunch	\$180	\$198	\$216	\$171	\$162	\$873
Lunch Bunch & Enrich.	\$440	\$484	\$527	\$418	\$396	\$1870

Total: \$ _____

These enrichment classes are subject to change & contingent upon enrollment with a minimum number of children. In the event that a class is canceled we will have a playtime option.

Return to the school office no later than each Friday prior to the session you're registering for.

Check the appropriate box below to indicate your method of payment:

- I would like to divide payment in half. The half will be due by October 31, 2019.
- Enclosed you will find a check made out to: Temple Beth El w/ "Rainbow Connection" in the memo line.
- I would like to have the Fall LB/E amount added into my tuition payments.

* If available, a per diem request for Lunch Bunch will be charged \$15, and enrichment will be charged \$20. Payment due at date of service.

Parent signature _____

Date _____



The following papers need to be returned to:

Keshet Preschool
Temple Beth El
139 Winton Rd. S. Rochester, NY
14610

By July 1st/ ASAP

- ___ First Tuition payment
- ___ Tuition Payment Option Form
- ___ Payment Authorization Form
- ___ Early Drop Off/ Punch Card Registration (*if interested*)
- ___ Rainbow Connection Registration – Lunch Bunch & Enrichment Classes (*if interested*)

No later than August 1st

- ___ Medical Statement of Child in Childcare (*record of immunizations*)
- ___ Food Allergy Action Plan (*if applicable*)
- ___ Preschool Information & History Form
- ___ Family Picture for the cubby (4 x 6)

Thank you very much. We are looking forward to a wonderful year ahead!!

- I have a key fob for the Keshet entry door.
- I need a key fob for the entry door.
- I have read the information included in the parent handbook and associated papers.

Parent signature _____

Date _____



Temple Beth El 139 Winton Road S. Rochester, NY 14610 Office: (585) 473-1770

Payment Authorization Form

Temple Beth El is offering three payment options for your Keshet Preschool tuition payments. Contact the school office at 473-1190, if you have any questions.

Please fill out the form below and return by July 1st with your tuition payment agreement.

Payment Options: (check which choice you prefer) All tuition payments must be paid by April 1, 2020.

- Full Payment by July 1, 2019
- For all payment plans a credit card or ACH must be provided*
- 3 Payments: July 1, August 1, & October 1, 2019 + \$35 processing fee
- 5 Payments: July 1, August 1, September 1, October 1, & November 1, 2019 + \$50 processing fee
- 10 Payments: July 1, 2019 – April 1, 2020 + \$100 processing fee (10 payments will only be available if the 1st payment is made by July 2019)

Please choose one of the following three options for your tuition payments.

1. Personal Check – please make all checks payable to: Temple Beth El (*available for deposits & full payment*)
2. ACH (Automatic Clearing House) – network is a nationwide electronic funds transfer system that provides for automatic payments directly from your bank account to Temple Beth El's account. These withdrawals will be scheduled based on your option selected above and is available for reoccurring payments. Please contact the office if you would like to select this option.
3. Credit Card – use the option circled on the attached Tuition Payment Option Form. These charges will be scheduled based on your option selected above and is available for reoccurring payments.

Credit Card #: _____ Exp. Date: _____

My signature below authorizes Temple Beth El to charge my Keshet Preschool Tuition payments as designated above:

Name (print): _____

Full Address: _____

Phone #: _____

I will notify Temple Beth El of any changes in my credit card or bank account number.

Parent signature _____

Date _____



INFORMATION & HISTORY FORM
2019-2020

Please be sure to keep this information up-to-date as the year progresses.
Please let us know when phone numbers, addresses, etc. are changed.

Child's Name _____ Gender ___F
___M
Date of Birth _____ Child's Hebrew Name (if any) _____
Family Address _____ City _____ Zip _____
Home Phone # _____

Parent's Name _____ Email: _____
Cell #: _____ Work #: _____ Home #: _____
Occupation: _____ Hobbies: _____

Parent's Name _____ Email: _____
Cell #: _____ Work #: _____ Home #: _____
Occupation: _____ Hobbies: _____

Child's sibling(s) names and ages:

IN CASE OF EMERGENCY

Name of Emergency Contact: _____ Relationship to child: _____
Phone #: _____
Pediatrician Name: _____ Phone #: _____
Dentist Name: _____ Phone #: _____

PERMISSION

My child, named above, has permission to attend all supervised field trips and activities of Keshet Preschool from September 2019 – June 2020. I/We understand that reasonable vigilance in the care and supervision of the children will be exercised. Beyond this I/We will not hold the school or those supervising the trip responsible.

Parent signature _____ Date _____

Parent signature _____ Date _____

I authorize the use of photographs of my child for Keshet advertising. No names will ever be used without additional parent permission.

TRANSPORTATION

These are the people that you are allowing to pick up your child. Otherwise, we will need written permission to dismiss your child to anyone not noted on this list.

1.

2.

ALERTS

Things Keshet should know about my child

Allergies and treatment:

Medications:

Accidents, illnesses or traumas:

DEVELOPMENTAL INFORMATION

Please explain any concerns that you might have about your child's development:

Social:

Emotional:

Physical:

Techniques for calming your child when upset:

Special interests your child has:

Other information, about your child, that you would like our staff to be sensitive to:

Please be sure to alert our staff if any issues or concerns develop throughout the year. Sometimes changes at home will affect a child's behavior in school. This information will help us to help your child through any difficulties.

We are committed to a close partnership between home and school.

Please return this and all forms by August 1st

Parent signature _____

Date _____