



139 Winton Road South
Rochester, New York 14610

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<http://www.tberochester.org>

Mandi Warner
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Rabbi Leonardo Bitran
Hazzan Randall Levin
Deborah Zeger, Executive Director



Keshet Preschool at Temple Beth El
139 Winton Road S. Rochester, NY 14610
(585) 473-1190

Mandi Warner, Director
mwarner@tberochester.org

Keshet Camp Registration 2019

Student Information (1) <i>Please Note: Children Entering Kindergarten are only eligible for Keshet camp through the week ending July 12</i>	
Name:	Gender:
Date of Birth:	
Will this be his/her first time in a preschool program?	
Child's Age: 2 Years Old <i>(by 12/1/2019)</i> 3 Years Old <i>(by 12/1/2019)</i> 4 Years Old <i>(by 12/1/2019)</i>	
Student Information (2)	
Name:	Gender:
Date of Birth:	
Will this be his/her first time in a preschool program?	
Child's Age: 2 Years Old <i>(by 12/1/2019)</i> 3 Years Old <i>(by 12/1/2019)</i> 4 Years Old <i>(by 12/1/2019)</i>	
Parent's Information	
Temple Beth El Member: Y / N	
Name:	Jewish? Y / N
Email Address:	
Cell Phone:	
Name:	Jewish? Y / N
Email Address:	
Cell Phone:	
Mailing Address:	
City / State / Zip:	
Home Phone:	

<i>Tuition</i> <i>Tuition if registered by April 1, 2019</i>				<i>After April 1, 2019</i>			
Days Per Week	5	Pitzels T, W, Th	Pitzels Plus M/F		5	Pitzels T, W, Th	Pitzels Plus M/F
TBE Family	\$180 (per week)	\$105 (per week)	\$40 (a day)		\$185 (per week)	\$110 (per week)	\$45 (a day)
Non-TBE Family	\$180 (per week) + \$20 registration fee	\$105 (per week) + \$20 registration fee	\$40 (a day) + \$20 registration fee		\$185 (per week) + \$20 registration fee	\$110 (per week) + \$20 registration fee	\$45 (a day) + \$20 registration fee

All 2018-2019 school tuition must be fully paid to register for Camp

- **Camp Hours are 9 –1 (bring a dairy lunch and please no nuts)**
- A \$ 15/week discount will be given to families with more than one child enrolled
- If you register for all 7 weeks you can save \$5 per week (before April 1) and \$4 a week (after April 1)
- Any registration after June 17 will cost an extra \$5

Please mark each week you are attending with the initials of the child you are registering.

Week 1 (June 17-21): Welcome to summer! _____ Week 1 Pitzel Camp _____

Week 2 (June 24-28): Under the Big Top _____ Week 2 Pitzel Camp _____

Week 3 (July 8-12): We're going Camping _____ Week 3 Pitzel Camp _____

Week 4 (July 15-19): What's Cookin' _____ Week 4 Pitzel Camp _____

Week 5 (July 22-26) Animals Around the World _____ Week 5 Pitzel Camp _____

Week 6 (July 29-August 2) We're Out of This World _____ Week 6 Pitzel Camp _____

Week 7 (August 5-9): Messy Art! _____ Week 7 Pitzel Camp _____

Pitzels Plus-Interested in enrolling your Pitzel for Mondays and Fridays (\$40/day or \$45/day after April 1)? Please circle below:

Week 1: M/F Week 2:M/F Week 3: M/F Week 4: M/F

Week 5: M/F Week 6: M/F Week 7: M/F

Interested in enrichments? T/Th? (Please circle) Yes/No

Interested in Early Drop-Off? Yes/No

Please note that photos may be used for promotional purposes and on our Temple Beth El and Keshet Facebook pages. We will respect all requests when it comes to photos.

_____ My child's photo is allowed to be taken for promotional purposes, as well as in-house usage for newsletters.

_____ My child's photo can be taken for in-house purposes only.

_____ I do not want my child's photo taken at all.

Enrollment Agreement

This agreement is made between Temple Beth El, 139 Winton Road South, Rochester, New York 14610 and the undersigned parent(s) or guardian(s) of _____ . It is understood that this is a binding agreement. This signed agreement must be returned to the camp with your deposit.

Payments must be made in full before the start of the camp weeks attended.

A NON –REFUNDABLE deposit of one week's camp is required along with this application. This can be made with a credit card or personal check.

All checks must be made out to: **Temple Beth El**

Withdrawal Policy:

Two weeks notice prior to the scheduled week's start date is required for full refund of tuition. It is understood that Temple Beth El shall have the right to collect all amounts due pursuant to this contract and that any collection efforts shall include responsibility by the parents / guardians for any collection or legal fees.

We have read and understand this enrollment contract and agree that by signing it we accept responsibility for all financial obligations contained herein.

Parents: Name _____ Signature _____

Name _____ Signature _____

Person(s) responsible for payments to Temple Beth El.

Name _____ Signature _____

Name _____ Signature _____

Date _____

(You will receive a copy of this form with your enrollment confirmation in the mail.)

Accepted by _____ Date _____

Mandi Warner, Director of Early Childhood

for office use:

	Deposit	Confirm	>VN	Choice	Folder
Date:					