



**OHEV SHALOM EARLY EDUCATION CENTER**

**944 Second Street Pike, Richboro, PA 18954**

**Telephone: (215) 322-9583**

**Fax: (215) 322-4183**

**E-mail: preschoolsecretary@ohev.org**

**Registration Form for School Term 2010-2011**

CHILD'S FIRST NAME: \_\_\_\_\_ MIDDLE: \_\_\_\_\_ LAST: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOWN: \_\_\_\_\_ ZIP: \_\_\_\_\_

FAMILY E-MAIL: \_\_\_\_\_ SCHOOL DISTRICT: \_\_\_\_\_

Local Elementary School (Kindergarten/Kindergarten Enrichment Only): \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ other number: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ other number: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

SIBLINGS: Please list names and ages of each: \_\_\_\_\_

Current Synagogue affiliation: \_\_\_ Ohev Shalom \_\_\_ None \_\_\_ Other: \_\_\_\_\_

**CLASSES AVAILABLE:**

(All classes except infants and 18 month olds, are based on birthdays by September 1. Please check the appropriate class for your child.)

- \_\_\_\_\_ Infant Center (3 months+)      \_\_\_\_\_ 18 m. Young Toddler Class      \_\_\_\_\_ 2 year old Toddler Class
- \_\_\_\_\_ 3 year old Pre-School Class      \_\_\_\_\_ 4 year old Pre-K Class      \_\_\_\_\_ Kindergarten
- \_\_\_\_\_ Kindergarten Enrichment

**PROGRAM HOURS:**

- Daycare: 7:15 am - 6:00 pm (Fridays close @5:00)
- Morning session: 9:15 am - 12:00 pm
- Morning + lunch: 9:15 am - 1:00 pm
- Full day session: 9:15 am - 3:15 pm
- Morning Kind. Enrichment: 9:15 am – \*12:00 / 1:00 pm
- Afternoon Kind. Enrichment: 12:00 pm - 3:15 pm
- Early Care: 7:15 am - 9:15 am
- Late Care: 3:15 pm - 6:00 pm (Fridays close @5:00)

\*depending on bus pick-up

**Classes will have minimums and maximums. Classes will be closed as they fill up. Registration is first come, first served. Some classes may not open if there is not enough interest in a certain schedule.**

**SELECT YOUR CHILD'S PROGRAM: (check all that apply)**

**Infant Center or Day Care Option:**

\_\_\_\_ 2 days      \_\_\_\_ 3 days      \_\_\_\_ 4 days      \_\_\_\_ 5 days

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**18mos- Pre-K classes:**

**AM Schedule**

\_\_\_\_ 2 mornings (*toddler classes only*)      Please write which days \_\_\_\_\_  
\_\_\_\_ 3 mornings (M, W, F) (*all classes except pre-K*)      Please write which days \_\_\_\_\_  
\_\_\_\_ 4 mornings (Any Days) (*all classes*)      Please write which days \_\_\_\_\_  
\_\_\_\_ 5 mornings (M - F)

**Lunch Care:** (check only if your child is staying until 1:00 pm)

\_\_\_\_ Monday      \_\_\_\_ Tuesday      \_\_\_\_ Wednesday      \_\_\_\_ Thursday      \_\_\_\_ Friday

**PM Schedule:** (Please indicate in writing your afternoon(s) of choice)

\_\_\_\_ 1 afternoon      \_\_\_\_ 2 afternoons      \_\_\_\_ 3 afternoons      \_\_\_\_ 4 afternoons      \_\_\_\_ 5 afternoons  
Please write which days \_\_\_\_\_

**Kindergarten:**

\_\_\_\_ 5 mornings and 3 afternoons      \_\_\_\_ 5 mornings and 5 afternoons

**Kindergarten Enrichment:**

\_\_\_\_ Morning Enrichment (Only available to children enrolled in public school in the afternoon)  
\_\_\_\_ 3 mornings      \_\_\_\_ 4 mornings      \_\_\_\_ 5 mornings  
\_\_\_\_ Afternoon Enrichment (Only available to children enrolled in public school in the morning)  
\_\_\_\_ 3 afternoons      \_\_\_\_ 4 afternoons      \_\_\_\_ 5 afternoons

**Extended Care Options:**

\_\_\_\_ **Early Care 7:15-9:15**      \_\_\_\_ **Early Care 8:15-9:15**  
\_\_\_\_ Monday      \_\_\_\_ Tuesday      \_\_\_\_ Wednesday      \_\_\_\_ Thursday      \_\_\_\_ Friday  
\_\_\_\_ **Late Care until 4:15**      \_\_\_\_ **Late Care until 5:15**      \_\_\_\_ **Late Care until 6:00 (not available Fridays)**  
\_\_\_\_ Monday      \_\_\_\_ Tuesday      \_\_\_\_ Wednesday      \_\_\_\_ Thursday      \_\_\_\_ Friday

Your registration must include:

- (1) This **registration form** completely filled in.
- (2) A **non-refundable deposit of \$300** to the Pre-School Office. Entire deposit will be applied to your tuition.
- (3) The signed **Parental Agreement Contract / Permission Form**.
- (4) The **family /child biography form**. (*can be obtained from school office*)

**Total Tuition – based on prices on the next page:** \$ \_\_\_\_\_

**School Fees**

**\$36 Security Fee** - covers 2 key fobs - (Required for families who have not already paid this fee. \$ \_\_\_\_\_

**\$25 Program Fee** – covers special in-house programs (Required for all children) \$ \_\_\_\_\_

**TOTAL TUITION TO BE PAID** \$ \_\_\_\_\_

Payment Option (see agreement for details): \_\_\_\_ In Full (2 ½ % Discount)      \_\_\_\_ 10 Installments

**PARENT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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Check if new to Ohev Shalom: \_\_\_\_      Returning Families ACCOUNT #: \_\_\_\_\_

Check No: \_\_\_\_ Amount: \_\_\_\_ Date: \_\_\_\_

Office Use Only:      Received by: \_\_\_\_\_ Date: \_\_\_\_\_