

(Check One) ___ Member ___ Non-Member

Date of Enrollment ___/___/___

Account Number M/N ___/___/___/___

School: 610-667-6534

Har Zion Temple
The Noreen Cook Center for Early Childhood Education
Rose & Joseph Schimmel Preschool
STAY AND PLAY PROGRAM APPLICATION
Summer 2010



Rabbi Nogah Marshall, Educational Director

Debbie Folz, Noreen Cook Center Director

Please enroll my child and me in one of the following Stay and Play Classes (Check One):

WEDNESDAY, 11:30-12:30 AM (6-12 months)

June 23 – August 11

Member - \$140, Non-member - \$165

WEDNESDAY, 9:15-10:45 AM (12-24 months)

June 23 – August 11

Member - \$200, Non-member - \$235

Child's Name _____ Sex _____ Birthdate ___/___/___
Last First

Address _____ Age as of July, 1, 2010 Yrs. ____ Mnths. ____

City _____ State _____ Zip _____ - _____ Phone _____

Father's Name	Mother's Name
Residence Address	Residence Address
City State Zip -	City State Zip
Business Name	Business Name
Street	Street
City State Zip -	City State Zip -
B. Phone Cell Phone	B. Phone Cell Phone
Email	Email
Occupation	Occupation

Any special information of which we should be aware (i.e. Allergies, Medication, Diet)?

The Noreen Cook Center for Early Childhood Education has our permission to use any photo, picture, or likeness of our child or any family member for promotional purposes.

Application Requirements & Financial Arrangements:

HAR ZION MEMBERS: In order for us to process your child's application for the 2010-2011 school year at the member rate, your 2009-2010 membership dues must be paid in full at the time this application is presented to the office. In addition, Noreen Cook Center, Religious School and all other 2009-2010 synagogue financial obligations must be current. Furthermore, parents enrolling their child in the Noreen Cook Center as members must maintain a valid membership throughout the school year. Therefore, it is understood that if accepted, your 2010-2011 membership dues (to be billed on or about May 1, 2010) will be paid in full by September 1, 2010. If membership renewal is not made as noted, school fees will be converted to the Non-Member rate retroactively.

NON-MEMBERS: If applying as a Non-Member, this application can only be processed if all school and other 2009-2010 synagogue obligations are current.

TO ALL FAMILIES: It is further understood that acceptance into this program in the Rose & Joseph Schimmel Preschool of the Noreen Cook Center requires payment in full to accompany this registration form.

We look forward to having your child with us in the preschool. Occasionally a child may be asked to leave because the child is not ready for school, has a special problem that cannot be handled within the limits of a normal classroom situation or otherwise because of our concerns for the safety and well-being of the class as a whole. Tuition previously paid will be prorated and refunded accordingly.

CANCELLATION & REFUND POLICY:

No refunds will be issued and/or credit transferred to any other division of Har Zion Temple for any reason. Only the President of Har Zion Temple can make exceptions to this policy.

Please note that if there are any special circumstances or special problems of which the school should be aware, please contact our Director before this application is filed.

<p>Please charge:</p> <p><input type="checkbox"/> Tuition</p> <p>Method of payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express</p> <p>Amount to charge (MUST BE PAID IN FULL) _____</p> <p>Card # (including security code found on back of card) _____ - _____</p> <p>Card Expiration Date _____</p> <p>There is a 2% service fee.</p>
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We have read and agree to be legally bound by all of the terms and conditions set forth above.

DATE _____

PARENT/GUARDIAN SIGNATURE _____

PARENT/GUARDIAN SIGNATURE _____