



Preschool Registration Form

Today's Date: _____

Child's Name (Last) _____ (First) _____

Birth Date _____ Age _____ [] Boy [] Girl

Home Address _____

City/State/Zip _____

Phone _____ Email _____

Parent Name _____

Business Phone _____ Cell Phone _____

Parent Name _____

Business Phone _____ Cell Phone _____

Please check program for which you are applying

[] Infant Room, ages 6 months - 23 months, 5 full days per week

[] 2 year old half day, 3 days per week

[] 2 year old half day, 5 days per week

[] 2 year old full day, 5 days per week

[] 3 year old half day

[] 3 year old full day

[] 4 year old half day

[] 4 year old full day

[] Kindergarten I (*must be 5 years old by December 31*)

[] Kindergarten II (*must be 5 years old by September 1*)

Extended Day Option for Half Day 2's, 3's and 4's

[] Lunch Option (12-1pm) M T W Th F (*Please circle days*)

[] Lunch Plus (12-3:30pm) M T W Th F (*Please circle days*)

Before and After School Options

[] Early Care (8-9am) M T W Th F (*Please circle days*)

[] Late Care (3:30-6pm) M T W Th F (*Please circle days*)

(*May also sign up as needed during the school year.*)

• A \$250 non-refundable deposit is required. • An additional \$50 non-refundable deposit is required for Early or Late Care. • Sibling discount of \$1,050.



Kaiserman JCC • 45 Haverford Rd, Wynnewood, PA 19096 • www.phillyjcc.com

In partnership with the Jewish Federation of Greater Philadelphia.