

TEMPLE BETH SHALOM NURSERY SCHOOL
1461 BALTIMORE-ANNAPOLIS BLVD.
ARNOLD, MD 21012
(410) 757-0552

For School Use:
Date Rec'd _____
Fee Rec'd _____
J2 ___ 2 ___ 3 ___ 4 ___

APPLICATION
2011-12 School Year

Child's Name: _____
Last First Middle Nickname

Date of Birth: _____ Male/Female: _____

Address: _____ Home Telephone (____) _____
Street City Zip

	Parent #1	Parent #2
First & Last Name	_____	_____
Relationship to Child	_____	_____
Occupation:	_____	_____
Work Phone:	_____	_____
E-Mail:	_____	_____
Religion:	_____	_____
Affiliation:	Temple Beth Shalom _____	Other _____

Names, birth dates and genders of siblings: _____
How did you hear of Temple Beth Shalom Nursery School? *Chesapeake Family Magazine* _____ *The Capital* _____
Severna Park Voice _____ Friend /Neighbor _____ *Temple Topics* _____ Other _____

Priority Information _____ Temple member w/ returning students & their siblings _____ Temple members new to the school
_____ Returning student of non-members & their siblings _____ Child who has been enrolled in Temple Tots Programs
_____ Child of non-members new to the school

Session You Desire

- _____ TTH *Young Two's* Class 9-11:00am *Must turn 2 years old by December 31, 2011
Temple member \$898 ; non-member \$1,060 ****Start date is January 3, 2012**
- _____ TTH *Two's* Class 9-11:30am *Must be 2 years old by September 1, 2011
Temple member \$1,486; non-member \$1,773
- _____ MWF *Two's* Class 9 to 11:30am *Must be 2 years old by September 1, 2011
Temple member \$2,096; non-member \$2,463
- _____ MWF *Three's* Class 9 to Noon *Must be 3 years old by September 1, 2011
Temple member \$2,515; non-member \$2,956
- _____ M-F *Three's* Class 9 to Noon *Must be 3 years old by September 1, 2011
Temple member \$3,167; non-member \$3,577
- _____ M-F *Pre-K* Class 9 to 2:00pm *Must turn 4 years old by September 1, 2011
Temple member \$5,516; non-member \$5,986 (includes all specials)

REGISTRATON PROCESS

I (we) have read and understand the registration process which is enclosed. I (we) also understand that the \$100 application fee is **non-refundable** and does not guarantee my child's placement at Temple Beth Shalom Nursery School:

_____ **Parent # 1** _____ **Parent # 2**

**Temple Beth Shalom
Credit Card Payment Form
Early Childhood Programs**

If you would like your Temple Beth Shalom to charge the 2011-12 application fee to your credit card, please complete and return the form below. *We do not keep this information for carryover.* **Please be sure to complete the entire form.**

Today's Date: _____

Please charge my: VISA MasterCard Discover Card

Total Amount \$ _100.00 _____

Credit Card # _____

Exp. Date ____/____

Billing Address _____ Zip Code _____

City _____ State _____

Phone Number _____

Student's Name _____

Cardholder Name (please print) _____

Signature _____