



6261 S.W. 18th Street, Boca Raton, Florida 33433 Tel: (561) 750-9665



REGISTRATION FORM 2017/2018

****2017 Prices - Effective February 1, 2017****

Child's Last Name: _____ First Name: _____
 Date of Birth: _____ Sex: M _____ F _____
 Is your family a member of B'nai Torah Congregation: Yes _____ No _____
 Parent's Name: _____
 Street Address: _____
 Sub-Div: _____ City: _____ State: _____ Zip Code: _____
 Email Address (required): _____
 Phone: Home _____ Business _____ Mobile/Beeper _____
 Parent's Name: _____
 Street Address: _____
 Sub-Div: _____ City: _____ State: _____ Zip Code: _____
 Email Address (required): _____
 Phone: Home _____ Business _____ Mobile/Beeper _____
 Marital Status: Married _____ Separated _____ Divorced _____ Widowed _____ Other _____
 I authorize my child's information to be included on a class list to be shared (PLEASE INITIAL): Yes _____ No _____
 Sibling's names and ages: _____

Toddler: Children must be 2 by September 1, 2017

| | | |
|-----------------------------|--------------------|-------------|
| _____ Mon/Wed/Fri | 9:00 am - 12:00 pm | \$ 6,260.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 12:00 pm | \$ 9,765.00 |
| _____ Mon/Wed/Fri | 9:00 am - 1:30 pm | \$ 7,810.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 1:30 pm | \$11,260.00 |
| _____ Mon/Wed/Fri | 9:00 am - 3:00 pm | \$ 8,230.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 3:00 pm | \$13,455.00 |

Pre-School: Children must be 3 by September 1, 2017

| | | |
|-----------------------------|-------------------|-------------|
| _____ Mon/Wed/Fri | 9:00 am - 1:30 pm | \$ 7,965.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 1:30 pm | \$11,480.00 |
| _____ Mon/Wed/Fri | 9:00 am - 3:00 pm | \$ 8,390.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 3:00 pm | \$13,725.00 |

Pre-K: Children must be 4 by September 1, 2017

| | | |
|-----------------------------|-------------------|-------------|
| _____ Mon thru Fri (5 days) | 9:00 am - 1:30 pm | \$11,965.00 |
| _____ Mon thru Fri (5 days) | 9:00 am - 3:00 pm | \$14,250.00 |

Part Time (9-1:30) Semester 1 Pre-K and Semester 2 VPK (Mandatory: PBC VPK Voucher): Children must be 4 by September 1, 2017
 *Subject to change based on VPK Voucher Rate for Fall 2017/18 when released

| | | |
|--|-------------------|-------------|
| Semester 1 Pre-K: _____ Mon thru Fri (5 days) * program dates to follow | 9:00 am - 1:30 pm | \$ 9,250.00 |
| Semester 2 VPK (free of charge): _____ Mon thru Fri (5 days) * program dates to follow | 9:00 am - 1:30 pm | \$ 0 |

Full Time (9-3) Semester 1 Pre-K and Semester 2 VPK (Mandatory: PBC VPK Voucher): Children must be 4 by September 1, 2017
 *Subject to change based on VPK Voucher Rate for Fall 2017/18 when released

| | | |
|--|-------------------|-------------|
| Semester 1 Pre-K: _____ Mon thru Fri (5 days) * program dates to follow | 9:00 am - 3:00 pm | \$11,705.00 |
| Semester 2 VPK (free of charge): _____ Mon thru Fri (5 days) * program dates to follow | 9:00 am - 3:00 pm | \$ 0 |

Extended Hours for All Programs:

| | | |
|---|--------------------------------------|-------------|
| _____ Mon thru Fri (5 days) Toddler, Preschool, Pre-K | 7:30 am-6:00 pm (5:00 pm on Shabbat) | \$17,120.00 |
| _____ Mon thru Fri (5 days) | 7:30 am-9:00 am | \$ 2,460.00 |

Required Fees for Toddler, Preschool, Pre-K, Part Time and Full Time Semester 1 Pre-K:

| | |
|--|-----------|
| Non-Refundable Registration Fee (per child due at registration) | \$ 150.00 |
| Non-Refundable Deposit (Toddler, Preschool, Pre-K - applicable to final tuition payment - per child due at registration) | \$ 400.00 |
| Non-Refundable Security Fee (per child due with first tuition payment on July 1, 2017) | \$ 200.00 |

I UNDERSTAND THE POLICY ON SCHOOL REGISTRATION AND AGREE TO BE RESPONSIBLE FOR PAYMENT OF ALL FEES DUE. I UNDERSTAND THE FAILURE TO MAKE PAYMENT AS REQUIRED WILL RESULT IN TERMINATION OF SERVICE. I UNDERSTAND THERE ARE NO REDUCTION IN FEES OR REFUNDS DUE TO ABSENCE, ILLNESS OR WITHDRAWAL.

Signature (Parent or Guardian): _____ Date: _____

Program: _____ Toddler _____ Preschool _____ Pre-K _____ VPK (Voucher Attached)

| | |
|---------------------------------------|---|
| Program Fee: \$ _____ | First payment Due: <input type="text"/> |
| Discount (if applicable): \$(_____) | Final Payment Due: <input type="text"/> |
| Total Program Fee: \$ _____ | |

| | | | | | |
|--|--------------------|--------------------------|---------------|--------------------------|-------------|
| Registration Fee: Amount Due: \$ _____ | Amount Paid: _____ | <input type="checkbox"/> | Check # _____ | <input type="checkbox"/> | Credit Card |
| Deposit: Amount Due: \$ _____ | Amount Paid: _____ | <input type="checkbox"/> | Check # _____ | <input type="checkbox"/> | Credit Card |
| Security Fee: Amount Due: \$ _____ | Amount Paid: _____ | <input type="checkbox"/> | Check # _____ | <input type="checkbox"/> | Credit Card |
| Apply to Program Fee: Amount Due: \$ _____ | Amount Paid: _____ | <input type="checkbox"/> | Check # _____ | <input type="checkbox"/> | Credit Card |
| Total Paid: \$ _____ | | | | | |

Circle One: Visa MasterCard Amex Card No: _____ Exp Date: _____ CVV: _____

Name as it appears on the card: _____ Signature: _____

If third party credit card, please provide full address and telephone number of third party: _____