## THE RUTH AND EDWARD TAUBMAN EARLY CHILDHOOD CENTER

6261 S. W. 18<sup>th</sup> Street - Boca Raton, FL 33433 (561) 750-9665 *Naomi Gordon, Director* 

## **FAMILY TIME SUMMER 2019 REGISTRATION**

| Child's Last Name         |                                 | First Name                     |                      |  |  |  |  |  |
|---------------------------|---------------------------------|--------------------------------|----------------------|--|--|--|--|--|
| Child's birthdate         | Sex: M F                        | Are you a member of            | f B'nai Torah? YesNo |  |  |  |  |  |
| Parent's Name             | Stre                            | Street Address                 |                      |  |  |  |  |  |
| Sub-Div:                  | City                            | State                          | Zip Code             |  |  |  |  |  |
| Phone: Home               | Business                        | Mobile/Beeper                  |                      |  |  |  |  |  |
| Email Address (requir     | red):                           |                                |                      |  |  |  |  |  |
| Parent's Name             | Street Address_                 |                                |                      |  |  |  |  |  |
| Sub-Div:                  | City                            | State                          | Zip Code             |  |  |  |  |  |
| Phone: Home               | Business                        | Mobile/Beepe                   | er                   |  |  |  |  |  |
| Email Address (requir     | red):                           |                                |                      |  |  |  |  |  |
| Marital Status:           | Married Separated               | Divorced                       | Widowed              |  |  |  |  |  |
| Siblings names & age      | s:                              |                                |                      |  |  |  |  |  |
| I authorize my child's    | information to be included on a | class list to be shared (PLEAS | SE INITIAL): Yes No  |  |  |  |  |  |
| Emergency Contact:        | ct: Name Phone                  |                                |                      |  |  |  |  |  |
| Physician: Name           | Phone                           |                                |                      |  |  |  |  |  |
| Please list any allergion | es:                             |                                |                      |  |  |  |  |  |
| *******                   | *********                       | ********                       | *********            |  |  |  |  |  |

## Registration Schedule for Family Time Summer 2019

Wednesday, February 13, 2019 - Registration for Synagogue Members and children enrolled in Family Time January 2019

Wednesday, February 20, 2019 - Registration for siblings enrolled in The Ruth and Edward Taubman Early Childhood Center

Wednesday, February 27, 2019 - Open Registration to general public

## **FAMILY TIME PROGRAMS ~ SUMMER 2019**

Please indicate your choice of programs below:

| r lease maleate your enoice (  | or programs below.                              |                            |                              |                                   |  |
|--|---|----------------------------|------------------------------|-----------------------------------|--|
| DAYS   | <b>BIRTHDAY</b>                                 |                            | <u>TIMES</u>                 | PROGRAM COST                      |  |
| My Family & Me<br>Sundays (3 classes)<br>June 23, July 14, 28<br>*Registration fee waived if current   | 6-24 months  Ily enrolled in another Family     | √Time class                | 10:15 a.m. – 11:45 a.m.      | . \$90                            |  |
| <b>Shabbat &amp; Me Fridays (8 classes)</b> June 14, 21, 28, July 12, 19, 26, A  | All Ages  |                            | 9:15 a.m. – 10:45 a.m.       | \$240                             |  |
| Discover Me Wednesdays (8 classes) June 12, 19, 26, July 3, 10, 17, 24 * Free tuition for the birthdays lister   |   | ril 1, 2019                | 1:30 p.m. – 2:15 p.m.        | FREE TUITION! * Reg. Fee Required |  |
| Lovable Me<br>Thursdays (8 classes)<br>June 13, 20, 27, July 11, 18, 25, A   | <b>September 2, 2018 – J</b><br>August 1, 8     | lanuary 31, 2019           | 11:00 a.m. – 12:30 p.m.      | . \$240                           |  |
| Curious Me Wednesdays (9 classes) June 12, 19, 26, July 3, 10, 17, 24 OR   | <b>April 1, 2018 – Septem</b><br>, 31, August 7 | nber 1, 2018               | 11:00 a.m. – 12:30 p.m.      | . \$270                           |  |
| Thursdays (8 classes) June 13, 20, 27, July 11, 18, 25, A  | rugust 1, 8                                     |                            | 9:15 a.m. – 10:45 a.m.       | \$240                             |  |
| Active Me/Powerful Me<br>SESSIONS:<br>Mondays (8 classes)<br>June 17, 24, July 1, 8, 15, 22, 29,<br>OR   | <b>September 2, 2017 – J</b> August 5           | July 1, 2018               | 11:00 a.m 12:30 p.m.         |                                   |  |
| Tuesdays (9 classes) June 11, 18, 25, July 2, 9, 16, 23, OR  | 30, August 6                                    |                            | 9:15 a.m. – 10:45 a.m. \$270 |                                   |  |
| <b>Tuesdays (9 classes)</b> June 11, 18, 25, July 2, 9, 16, 23,  | 30, August 6                                    |                            | 11:00 a.m. – 12:30 p.m.      | . \$270                           |  |
| Transition Me Mondays & Wednesdays (17 cla June 12, 17, 19, 24, 26, July 1, 3,   | 8, 10, 15, 17, 22, 24, 29, 31,                  | , August 5, 7              | 9:15 a.m. – 10:45 a.m.       | <b>\$555</b>                      |  |
|  | Regist  | ration & Payment Polici    | ies                          |                                   |  |
| <ol> <li>Non-refundable Registration &amp; Security Fee (per child)</li> <li>Non-refundable Tuition payment is due in full at time of registration.</li> <li>Class Schedule - There will be no make-ups for any <u>Family Time</u> class.</li> <li>Absence: NO REFUNDS OR CREDITS WILL BE MADE DUE TO ABSENCES, ILLNESSES OR WITHDRAWALS.</li> <li>We reserve the right to revise the schedule based on enrollment.</li> </ol> |   |                            |                              |                                   |  |
| I hereby enroll my child in the Fam<br>EDWARD TAUBMAN EARLY CH<br>RUTH AND EDWARD TAUBMAN<br>immediate termination of service.   | ILDHOOD CENTER. I unde                          | erstand there are NO REF   | UNDS. I agree to be respon   | nsible for all fees due the       |  |
| Signature of parent/guardian   |   |                            |                              |                                   |  |
| Amount paid \$   |   | Check #                    |                              |                                   |  |
| Please apply the indicated amoun   | t above to my (circle one):                     | Visa                       | Master Card V                | WE DO NOT ACCEPT AMEX             |  |
| Credit Card Number   |   | Ex                         | piration Date                | CVV:                              |  |
| Please print your name as it appear  | ars on the credit card:                         |                            |                              |                                   |  |
| If third party credit card, please pro   | ovide full address and teleph                   | none number of third party | <i>y</i> :                   |                                   |  |
|  |   |                            |                              |                                   |  |