

2011-2012 SCHOOL YEAR - REGISTRATION FORM

B'NAI SIMCHA JEWISH COMMUNITY PRESCHOOL  
550 SOUTH SECOND AVENUE  
ARCADIA, CA 91006 (626) 445-4805

Please return with registration fee of \$100 for new students (\$70 new siblings) and a \$40 fee for returning students.

Child's Full Name \_\_\_\_\_

Child's Preferred Name \_\_\_\_\_ Email: \_\_\_\_\_

Child's Birth date \_\_\_\_\_

Parent 1 Name \_\_\_\_\_ Parent 2 Name \_\_\_\_\_

Home Address \_\_\_\_\_

Phone Numbers: Home ( ) \_\_\_\_\_ Parent 1 Work ( ) \_\_\_\_\_ Parent 2 ( ) \_\_\_\_\_

Cell ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Are you members at a synagogue? (Please name Synagogue) \_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_

I understand that there are several enrollment possibilities for September, 2011.

I prefer (please check):

Circle Preferred Days

\_\_\_\_\_ 2 days/week – Monday Tuesday Wednesday Thursday Friday

\_\_\_\_\_ 3 days/week – Monday Tuesday Wednesday Thursday Friday

\_\_\_\_\_ 4 days/week - Monday Tuesday Wednesday Thursday Friday

\_\_\_\_\_ 5 days/week - Monday through Friday

\_\_\_\_\_ I wish to enroll in the flat fee daycare program for the days my child attends.

\_\_\_\_\_ I wish to enroll in the 9 a.m. – 1 p.m. program for the days my child attends.

Two Day option only for children under three years of age.  
(Pre Kindergarten children, must attend five days a week.)

Please be aware that every effort will be made to give you your first choice, but that it is not always possible. Do you have any questions you wish us to address specifically? Please specify and we will contact you directly.

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_