

2018-2019 REGISTRATION FORM



Child's Name _____ Date of Birth _____ Age as of 12/1/18 _____ Gender M F
First Last

Family Name _____ Parent _____ Parent _____
First Last First Last

Address _____ Work Phone _____ Work Phone _____
 City, State, Zip _____ Cell Phone _____ Cell Phone _____
 Home Phone _____ Email _____ Email _____

Temple Beth Zion Member? Yes No

NON CUSTODIAL PARENT WHO SHOULD RECEIVE SCHOOL INFORMATION

Name _____ Home Phone _____
 Address _____ City, State, Zip _____

Please **DO NOT** publish the above information in a family directory

EMERGENCY INFORMATION

IF A PARENT CANNOT BE REACHED:

CONTACT 1: _____ Phone _____ Relationship _____
 CONTACT 2: _____ Phone _____ Relationship _____

I give my permission for my child to receive emergency medical transportation and treatment
 if it becomes necessary and I cannot be reached by phone

Parent(s) Signature _____

1. Check Core Program

***REQUIRED
CORE PROGRAM:**
 PLACE "X" FOR SESSION

	2s (Shefanim) 9:00 a.m. - Noon <i>Early Drop off begins at 7:30 am (half day)</i>	3s (Zekitot) 9:00 a.m. - 2pm <i>Early Drop off begins at 7:30 am (half day)</i>	4s (Tziporim) 9:00 a.m. - 2pm <i>Early Drop off begins at 7:30 am (half day)</i>
T/TH	M/W/F	M/W/F	

2. Place an "X" for Additional Days and Hours

**** Early Drop off begins at 7:30 a.m.**

	TIME	M	T	W	TH	F
2's	Shefanim ½ Day		CORE		CORE	
	Shefanim Full Day					
3's	Zekitot ½ day	CORE		CORE		CORE
	Zekitot Full Day					
4's	Tziporim ½ Day	CORE		CORE		CORE
	Tziporim Full Day					

PALS★Kadimah Classes Held at TEMPLE BETH ZION

716.836.6565 | 700 Sweet Home Road | Buffalo, New York 14226 | Pals@tbz.org

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REGISTRATION FORM**



**TUITION SCHEDULE 2017-2018
MONTHLY TUITION RATES**

SHEFANIM (2's) HALF DAY (7:30am – 12N) FULL DAY (7:30am – 6pm) Annual Tuition (monthly rate x10)

5 Days / Week	\$ 625.00	\$1155.00	
4 Days / Week	\$ 500.00	\$925.00	
3 Days / Week	\$ 375.00	\$760.00	
2 Days / Week	\$ 250.00	\$500.00	
1 Day / Week	\$ 125.00	\$250.00	

ZEKITOT/TZIPORIM (3's & 4's) HALF DAY (7:30am – 2pm) FULL DAY (7:30am – 6pm) Annual Tuition (monthly rate x10)

5 Days / Week	\$ 890.00	\$1080.00	
4 Days / Week	\$ 720.00	\$860.00	
3 Days / Week	\$ 540.00	700.00	
2 Days / Week	\$360.00	470.00	
1 Day / Week	\$ 180.00	240.00	

TOTAL TUITION (a) \$ _____

Non-refundable registration fee enclosed with this form (b) \$ 100.00

TOTAL TUITION INCLUDING REGISTRATION FEE (a+b) \$ _____

PAYMENT OPTIONS - PLEASE INDICATE YOUR SELECTION WITH YOUR SIGNATURE

Tuition Payment Option 1

Registration fee plus tuition paid in full with this form. Pay by check payable to Temple Beth Zion or you may use your VISA, MasterCard or Discover card.

Signature _____

Tuition Payment Option 2

Registration fee paid in full with this form. Pre-authorize tuition to be paid to Temple Beth Zion in 10 equal monthly charges to VISA, MasterCard or Discover card beginning August 15, 2017 and ending May 15, 2018.

Signature _____

Tuition Payment Option 3

Registration fee paid in full with this form. Tuition to be paid to Temple Beth Zion in 10 equal payments by check beginning August 15, 2017 and ending May 15, 2018.

Signature _____

CREDIT CARD INFORMATION

Card Number _____ Expiration Date _____

Name as it appears on card _____