

THE FOREST HILLS JEWISH CENTER NURSERY SCHOOL & PRE-K FOR ALL

Lynn Fisher

Director of Early Childhood Education

lynn.fisher@fhjc.org

(718) 263-7000 Ext. 220

2023-2024 PRE-K WRAP AROUND PROGRAM, EARLY MORNING, AND EXTENDED DAY PROGRAM CONTRACT

Here are the options to enroll your child in the Judaic Wrap-Around Program and the Early Morning and Extended Day options available. These programs will take place Monday–Friday during the school year between September 2023 – June 2024 when school is open, unless otherwise noted on the calendar.

Child's Name _____ Hebrew Name _____
Last First (if applicable)

Child's DOB: _____

Parent #1 _____ Cell # _____
Last First MI Hebrew Name (if applicable)

Parent #2 _____ Cell # _____
Last First MI Hebrew Name (if applicable)

Email Addresses _____
Parent #1 Parent #2

Home Address _____ NY _____
Number/Street Apt# City Zip Home Phone #

Parent #1 Occupation/Employer _____ Parent #2 Occupation/Employer _____

Program

(Check All that Apply)

Day/Time

Fee

<input type="checkbox"/> Wrap only*	M-Th	8:20 AM-9:20 AM	\$1,635
	F	8:00 AM-8:25AM	
<input type="checkbox"/> Wrap & Early Drop*	M-Th	7:45 AM-9:20 AM	\$2,590
	F	7:45 AM-8:25 AM	
<input type="checkbox"/> Early Drop only (no Wrap)*	M-Th	7:45 AM-9:20 AM	\$2,590
	F	7:45 AM-8:25 AM	
<input type="checkbox"/> Extended Day Program*	M-Th	3:45 PM-6:00 PM	\$3,790

*Minimum enrollment required for all options

**FULL PAYMENT INFORMATION
REQUIRED AT TIME OF
REGISTRATION**

Tuition: \$

Extended Day: \$

Subtotal \$

3% CC Fee \$

Total to be paid \$

PAYMENT OPTIONS

I/we agree to pay the aforementioned balance due in the following manner:

- ☐ One payment on August 15, 2023
- ☐ Two equal payments to be made on August 15, 2023 and November 15, 2023. Two post-dated checks, OR two payments on your credit card, **must be submitted with this contract**
- ☐ Eight equal monthly payments (August 15, 2023 through March 15, 2024). Eight post-dated checks, OR eight payments on your credit card, **must be submitted with this contract**
- ☐ **Check here if paying by credit card. All credit card payments are subject to a 3% processing fee.**

* For enrollment after August 15, all payments scheduled prior to date of enrollment must be made at the time of enrollment.

I/We, the undersigned, hereby enroll our child in the Forest Hills Jewish Center Pre-K Wrap Around program, early morning drop off and/or extended day program for the school year beginning September 2023 and ending June 2024, pursuant to the terms and conditions specified in the Parent Guide and the following additional terms and conditions:

1. In the event of a medical emergency, it is agreed that if the undersigned cannot be reached by telephone, permission and consent are given to the school to obtain proper emergency medical treatment for the child.
2. The Forest Hills Jewish Center Nursery School reserves the right to terminate this agreement at its discretion when it deems such action to be necessary. In such an event, tuition will be refunded, on a prorated basis.
3. Unless written notice is received with this application, you hereby authorize the Forest Hills Jewish Center Nursery School to display pictures or images of your child in our school and in publicity materials.
4. Class placement is made at the discretion of the director.

It is expressly understood and agreed by the parties hereto that the privilege of paying installments is extended only as a convenience and does not in any way vary the obligation of the applicant to pay the amount in full. Each installment is automatically due on the date stated. The school hereby makes it known to the applicant that his/her child is being accepted for the entire year and that the fee stated is payment for a place in the program and not for the period of attendance. It is also understood that this installment method payment privilege will be revoked if we fail to comply with the above terms. All balances will then become immediately due. I/we further understand that this contract covers only those items mentioned (i.e. tuition). **There are no refunds.**

Parent #1 Signature

Parent #2 Signature

Date

Please note that pasting in your signature or typing in your name on the signature line constitutes a valid signature.

Early Childhood Director

Date

Child's Siblings' Names and Ages:

Name: _____ Age: _____ Name: _____ Age: _____

Full payment information is required at time of registration. Once this contract is completed and submitted, you will receive a call to provide your credit card payment information. All credit card payments are subject to a 3% processing fee. If you are paying with multiple checks, all post-dated checks must be received by the office for registration to be processed.

MasterCard [] Visa [] Discover [] Dated Checks []

For Office Use Only

Minimum registration is required for all classes

Credit Card #: _____ Sec: _____ Expiration Date: _____
(3% processing fee with credit card payments)

Payment Schedule: _____

FULL PAYMENT INFORMATION REQUIRED AT TIME OF REGISTRATION