

# Temple Beth Sholom Innovative School Foundation Level Enrollment Contract 2019-2020

Child: \_\_\_\_\_ Date of birth: Month Day Year Gender:  Male  Female

Parent or legal guardian 1: \_\_\_\_\_ Date of birth: Month Day Year

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Other Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Parent or legal guardian 2: \_\_\_\_\_ Date of birth: Month Day Year

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Other Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Parents' Marital Status:  Married/Partnered  Divorced  Single  Other Child resides with:  Parent 1  Parent 2  Other:

Siblings (list names/ages): \_\_\_\_\_ School(s) sibling(s) attend? \_\_\_\_\_

**Temple Membership is included in tuition if any member of the family identifies as Jewish.**  
Please select from the following options:  We are current members.  We would like to become members.  We do not wish to be members at this time.

Hours of operation will vary depending on the tuition plan. We are closed on Jewish and national holidays.

**I. ANNUAL REGISTRATION FEE by FEBRUARY 1, 2019:** (No prorations, refunds, or transfers) \$1,000 for the first child; \$900 each additional sibling.

**AFTER FEBRUARY 1, 2019:** \$1,250 for first child; \$1,150 each additional sibling.

**II. ANNUAL SECURITY FEE:** (No prorations, refunds, or transfers) \$375 per child. Due with registration fee.

**III. TUITION PAYMENTS:** Separate from registration and security fee and due according to the tuition plan option selected below. First tuition payment must be received by August 1, 2019 to secure enrollment. Five percent (5%) discount for additional sibling.

### Full school year (August 2019-June 2020) Tuition Plans for toddlers through Pre-K

↓ Select Schedule (Below) and Payment Plan (Right) → A \$25 charge applies for changes made after August 1, 2019	<input type="checkbox"/> A: 1 Payment Balance Due 8/1/19	<input type="checkbox"/> B: 2 Payments Balances Due 8/1/19 and 12/1/19	<input type="checkbox"/> C: 10 Monthly Payments Balances Due 8/1/19 through 5/1/20 with a valid Debit or Credit Card
<b>Three Days Per Week Schedule</b>			
<input type="checkbox"/> Toddler & 2 year-olds (Mon. Wed. Fri.) 9:00 am to 12:30 pm	\$8,800	\$4,500	\$9,000
<input type="checkbox"/> Toddler & 2 year-olds (Mon. Wed. Fri.) 9:00 am to 2:00 pm	\$9,800	\$5,000	\$10,000
<b>Five Days Per Week Schedule</b>			
<input type="checkbox"/> Toddler & 2 year-olds (Mon.-Fri.) 9:00 am to 12:30 pm	\$11,000	\$5,600	\$11,200
<input type="checkbox"/> Toddler & 2 year-olds (Mon.-Fri.) 9:00 am to 2:00 pm	\$12,500	\$6,375	\$12,750
<input type="checkbox"/> 3 year-olds (Mon.-Fri.) 9:00 am to 12:30 pm	\$11,800	\$6,000	\$12,000
<input type="checkbox"/> Pre-K & 3 year-olds (Mon.-Fri.) 9:00 am to 2:00 pm	\$13,250	\$6,750	\$13,500

*Extended care options are available. Separate Enrollment Contract is required. Please call the office for details 305.538.7231.*

### ORGANIC LUNCH OPTION

For 12:30 pm and 2:00 pm dismissals	1 payment/Total	2 payments of	Total	10 payments of	Total
<input type="checkbox"/> 3 Day Lunch Program (Served Mon., Wed., Fri.)	\$800	\$425	\$850	\$90	\$900
<input type="checkbox"/> 5 Day Lunch Program (Served Mon. through Fri.)	\$1,300	\$675	\$1,350	\$140	\$1,400

**CLASS PLACEMENT:** List one special friend you would like your child to be with (final placement is made at the discretion of The TBS/S Director). Please note that unless both families put each other's child as their one friend request we cannot guarantee that your children will be placed together. Please do not put more than one friend request.

1. \_\_\_\_\_

**IV. PAYMENT:** Registration, security fee, and tuition will be charged according to the tuition plan selected above.

M/C, Visa or Amex#: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

CHECK for registration deposit or Payment plan A: 1 Payment only (Payable to Temple Beth Sholom) Check #: \_\_\_\_\_ in the amount of \$ \_\_\_\_\_

**V. I (We) understand that my (our) obligation to pay the fees for the full school year is unconditional, and I (We) are jointly and severally responsible for payment of all fees. No portion of such fees paid or outstanding will be refunded, transferred, or canceled, notwithstanding absence, withdraw or dismissal from the School. Payment options and terms are authorized as selected above. It is further agreed that Foundation Level enrollment, as specified within this Contract, may be cancelled in writing, without penalty (except the forfeiture of the Annual Registration Fee) prior to August 1, 2019. As of August 1, 2019, parents or guardians financially responsible for students are obligated to pay the full annual charges.**

*I (We) understand and agree that I (We) am/are responsible for all costs of collection which shall include reasonable attorney's fees and costs, whether or not a lawsuit is filed, and which shall also include bankruptcy and appellate proceedings.*

*I (We) further agree and understand that I (We) waive any and all defenses under this provision irrespective of whether or not the child's space is eventually filled, and will be otherwise precluded from asserting the defense of the failure to mitigate damages.*

I have read and understand Temple Beth Sholom's immunization policy  I have read and agree to Publicity Release policy ([tbsmb.school/admissions/fine-print](http://tbsmb.school/admissions/fine-print))

Signature of Parent 1 or Legal Guardian 1 \_\_\_\_\_ Date \_\_\_\_\_ Temple Beth Sholom Innovative School \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent 2 or Legal Guardian 2 \_\_\_\_\_ Date \_\_\_\_\_ Temple Beth Sholom Innovative School \_\_\_\_\_ Date \_\_\_\_\_

*Enrollment contracts will not be processed nor will students have the ability to reserve space without payment, credit/debit card information and/or signature of parent or legal guardian.*