

Temple Beth Sholom Innovative School Foundation Level Enrollment Contract 2020-2021

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 if one or both parents is/are 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 10, 2020: (No proration, refunds, or transfers) \$1,000 for the first child; \$900 each additional sibling.

AFTER FEBRUARY 10, 2020: \$1,250 for first child; \$1,150 each additional sibling.

II. ANNUAL SECURITY FEE: (No proration, 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, 2020 to secure enrollment. Five percent (5%) discount for additional sibling.

Full school year (August 2020-June 2021) Tuition Plans for Toddlers through Pre-K

↓ Select Schedule (Below) and Payment Plan (Right) → A \$25 charge applies for changes made after August 1, 2020	<input type="checkbox"/> A: 1 Payment Balance Due 8/1/20	<input type="checkbox"/> B: 2 Payments Balances Due 8/1/20 and 12/1/20	<input type="checkbox"/> C: 10 Monthly Payments Balances Due 8/1/20 through 5/1/21 with a valid Debit or Credit Card
Three Days Per Week Schedule			
<input type="checkbox"/> Toddler & 2 year-olds (Mon. Wed. Fri.) 9:00 am to 12:30 pm	Total \$9,650	2 payments of \$4,975	Total \$9,950
<input type="checkbox"/> Toddler & 2 year-olds (Mon. Wed. Fri.) 9:00 am to 2:00 pm	Total \$10,650	2 payments of \$5,475	Total \$10,950
Five Days Per Week Schedule			
<input type="checkbox"/> Toddler & 2 year-olds (Mon.-Fri.) 9:00 am to 12:30 pm	Total \$12,350	2 payments of \$6,325	Total \$12,650
<input type="checkbox"/> Toddler & 2 year-olds (Mon.-Fri.) 9:00 am to 2:00 pm	Total \$13,850	2 payments of \$7,075	Total \$14,150
<input type="checkbox"/> 3 year-olds (Mon.-Fri.) 9:00 am to 12:30 pm	Total \$13,400	2 payments of \$6,850	Total \$13,700
<input type="checkbox"/> Pre-K & 3 year-olds (Mon.-Fri.) 9:00 am to 2:00 pm	Total \$14,900	2 payments of \$7,600	Total \$15,200

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

Tuition includes organic lunch and snack and temple membership.

CLASS PLACEMENT: List one special friend you would like your child to be with (final placement is made at the discretion of The TBSIS Head of School). 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. **Please note there are no additional credit card processing fees.**

Name on card: _____

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 canceled in writing, without penalty (except the forfeiture of the Annual Registration and Security Fees) prior to August 1, 2020. As of August 1, 2020, 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 have read and understand Temple Beth Sholom's immunization policy I have read and agree to Publicity Release policy ([tbsmb.school/admissions/fine-print](https://www.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 signature(s) of parent or legal guardian(s).