

## TBSIS 2021-2022 Infant/Toddler Enrollment Contract

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

OR - If the child is not yet born, please provide the due date and gender if known Due Date: Month Day Year Gender:  Male  Female

Date Range of Enrollment - Starting date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Parent 1: \_\_\_\_\_ Date of birth: Month Day Year

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

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

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

Parent 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): \_\_\_\_\_ What school(s) do 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 are Monday - Friday 7:30 am to 6:00 pm. We are closed on Jewish and national holidays.

**I. ANNUAL REGISTRATION FEE:** (No prorations, refunds, or transfers) \$1,200 for the first child; \$1,100 for each additional sibling in the infant/toddler program; \$900 each additional sibling in TBSIS pre-school and/or kindergarten.

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

**III. TUITION PAYMENTS:** Separate from registration fee and due according to the tuition plan option selected below. Parents must indicate term date starting from: \_\_\_\_\_ through \_\_\_\_\_.

Payment Options			
Select Options (Right) →	<input type="checkbox"/> <b>A: One Payment</b> Full payment is due with Registration Contract.	<input type="checkbox"/> <b>B: Monthly Payments</b> Balance due on the first of each month. This option is only available with a valid <b>Debit or Credit Card</b> .	
	Total	Monthly Increment	Total
7:30 am to 6:00 pm Monday-Friday	\$16,200	\$1,450	\$17,400

**For more information please contact Kayla Green, registrar, at 305.538.7231 ext. 223 or kayla@tbsmb.org.**

**III. PAYMENT:** Registration 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 \$ \_\_\_\_\_

*IV. I (We) understand that my (our) obligation to pay the fees for the full school year is unconditional, and I (We) am/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.*

*V. 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](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(s) of parent or legal guardian(s).*