## 2017-2018 Richard E. Rudolph Preschool Application

Reform Congregation Keneseth Israel 8339 Old York Road, Elkins Park, PA 19027 Liz Sussman, Director of Early Childhood Education preschooldirector@kenesethisrael.org 215-887-8700



Date of Birth: Age as of September 1, 2017:    Parent's Name:  Home Address:  Home Address (if different)  Home Phone:  Cell Phone:  Occupation:  Work Phone:  Email:  Emergency Contact:  Cell Phone:  Cell Phone:  Home Phone:  Email:  Email:  Figure Phone:  Home Phone:  If your child has any allergies, specific needs, or has been diagnosed with any physical, and any physical physi	Start Date: Age as of September 1, 2017:			
Home Address: Home Address (if different)  Home Phone: Home Phone:  Cell Phone: Occupation:  Work Phone: Work Phone:  Email: Email:  Emergency Contact: Relation:  Cell Phone: Home Phone:				
Home Phone: Home Phone: Cell Phone: Occupation: Work Phone: Email: Emergency Contact: Relation: Home Phone: Additional Information:				
Cell Phone: Cell Phone:   Occupation: Occupation:   Work Phone: Work Phone:   Email: Email:    Emergency Contact:  Cell Phone:  Home Phone:  Additional Information:	:			
Occupation:  Work Phone:  Email:  Emergency Contact:  Cell Phone:  Additional Information:				
Work Phone: Work Phone: Email: Email:  Emergency Contact: Relation: Cell Phone: Home Phone:				
Email: Email:    Email:  Relation:  Cell Phone:  Home Phone:  Additional Information:				
Emergency Contact: Relation:  Cell Phone: Home Phone:  Additional Information:				
Cell Phone: Home Phone:  Additional Information:				
Cell Phone: Home Phone:  Additional Information:				
Additional Information:				
emotional, or behavioral disability, please provide as much detail as possible on this form documented information. Approximately every six months, you will receive a Child Service This report describes your child's growth and development in the context of the services Preschool. The areas of observation align with Pennsylvania Learning and Academic Sta Childhood.	n and attach any ce Report for your chi provided by our			

## 2017-2018 Infant Center and Preschool Application

Please check the boxes indicating the days and hours your child will be attending. For early and late care, please provide the times your child will be dropped off and picked up.

	Morning Program	Full Day Program	Extended Day	Early Care	Lunch Bunch	Late Care	Late Care
	9:00am-12:00pm	9:00am-3:00pm	7:00am-6:00pm	7:00am-9:00am	12:00pm-1:00pm	3:00pm-4:30pm	3:00pm-6:00pr
nday	+						
esday							
dnesday	+						
ursday							
day							
	<ul><li>All so</li><li>For your</li></ul>	u withdraw from to the month follow chedule changes your convenience on the first of the summer plans.	during the date of during the yea e, your account month. June,	of departure.  r must be appr  will be billed in  July, and Aug	oved by Liz and monthly install gust will be pro	d Naomi. ments, and tui prated based o	tion is on
Pare	ent Signature					Date	
the r	n <u>plete <b>only</b> if pay</u> month. ment options (ple	-	_	be charged m Visa	onthly a few da	ys before the f	irst of
•	dit Card #				Date	CVV#	