

Readmission Application and Agreement for Registration 2019-2020

I am reserving a place at Beth Israel Preschool for my child _____, for the session beginning August 2019 and ending May 2020. I understand that the total amount paid to hold my child's position is **nonrefundable** and is **non-applicable** to other services rendered at Beth Israel Preschool **for any reason.** I understand that if I withdraw my child after July 1, 2019, *for whatever reason*, I will owe the Beth Israel Preschool fees for an additional month.

Signature of Parent

PLEASE ATTACH A CURRENT PHOTO OF YOUR CHILD TO THIS FORM

Child's Name: _____ Called _____

Child's Date of Birth: _____ Gender _____

Child's Address: _____

Parent Name: _____

Address: _____

Place of Employment _____

Telephone Numbers: _____

Email address: _____

Parent Name: _____

Address: _____

Place of Employment _____

Telephone Numbers: _____

Email address: _____

EXTENDED CARE (PLEASE CIRCLE): YES NO UNDECIDED

Financial Agreement

I understand that I am registering my child, _____, for the ENTIRE ten-month session. If I find it necessary to withdraw my child for any reason, I will give the school TWO (2) months' notice or pay TWO (2) month's tuition at the time my child leaves Beth Israel Preschool.

Field Trips (3, 4 and 5 years olds)

I give my child, _____, permission to participate in field trips as part of his/her experience at Beth Israel Preschool. I release said school from all liability for injury which might result from said field trips. I understand that I will be informed in advance of said trips.

Release of Liability

I do hereby release Beth Israel Preschool and its staff from any and all liability that may arise from any future injury to my child, _____, resulting from other than willful or malicious actions by the releases, or any of them.

Parent Signature

Date

WEST NILE VIRUS

Beth Israel Preschool is committed to protecting our children from the potentially fatal West Nile Virus. Because we will take every child to the playground, it is important to use mosquito spray as protection against mosquito bites. Please carefully read, sign one of the following paragraphs, and return this form to us, along with the spray/repellant of your choice.

I understand that Beth Israel Preschool will apply insect repellant that contains 10% or less DEET daily to my child before going to the playground. I also understand that I will not hold Beth Israel Preschool legally responsible if my child contracts West Nile Virus.

Parent Signature

Date

I **do not** authorize Beth Israel Preschool to apply insect repellant to my child and understand that no insect repellant will be applied to my child. I understand that Beth Israel Preschool will take my child to the playground daily. I also understand that I will not hold Beth Israel Preschool legally responsible if my child contracts West Nile Virus.

Parent Signature

Date