



The Andrew Friedland
**EARLY CHILDHOOD
 LEARNING CENTER**
 at Temple Beth Rishon
 585 Russell Avenue Wyckoff, NJ 07481
 www.bethrishon.org
 201-891-4466

2025-2026

Child's Name _____ Nickname: _____ Child's DOB: _____

Phone _____ Gender: M ___ F ___ Referred By: _____

Address: _____

Parent #1 Name: _____ Occupation: _____

E-mail: _____ Cell Phone: _____

DOB: _____ Work Phone: _____

Parent #2 Name: _____ Occupation: _____

Email: _____ Cell Phone: _____

DOB: _____ Work Phone: _____

List two people who can be responsible for your child in case of emergency if parents or caregiver cannot be reached.

Name: _____ Name: _____

Tel. No: _____ Tel. No: _____

Relationship: _____ Relationship: _____

Names & DOBs of Siblings: _____

Terms of Enrollment:

- I understand that the person who signs this contract is responsible for the total tuition and fees.
- I understand there is a non-refundable enrollment fee of \$695 plus a security fee of \$890 per family. The enrollment fee includes a TBR "Preschool Membership" and entitles your family to all the benefits of membership, including High Holy day tickets. The membership will remain in effect as long as you have a child enrolled in the preschool and until your oldest child enrolls in religious school, at which time the membership category would change.
- **I understand a 15% non-refundable deposit on tuition and fees is due upon enrollment and is non-refundable.** If a check is not included with your application, your credit card will be charged. If the school cancels a class, all fees will be returned in full. Applications are not considered complete until payment is received.
- I understand there is no credit for illness, holidays, vacations, early withdrawals, or school closings due to weather or emergencies, nor will make up days be scheduled.
- I will abide by the school's determination as to placement, teacher assignment, and all school policies. Policies available upon request.
- I understand my child will be sent home in case of illness, and I will abide by the school's policy that a child must be fever and vomit free for 24 hours (without medication) before returning to school. I acknowledge that my child **MUST** be current on all their vaccinations, **including the flu vaccine. No religious exemptions will be accepted.**
- **I understand that the school year runs from September 8, 2025 - June 11 2026.**

Credit card information is required of all families regardless of method of payment. Any accounts past due will be charged to the credit card on file. There is a 3% service fee on all credit card payments. There is no fee for tuition paid by check.

VISA ___ MC ___ AMEX ___ Card Number: _____ Exp. Date: _____ CVC _____

Parent Signature _____ Date _____

Easy online enrollment through ShulCloud for current families!

Class	Day/Time	Fees	5% Sibling Discount for second child. 10% for 3rd child. All children must be enrolled in the same school year to benefit from the sibling discount. Discount applies to tuition only, and is applied to the lowest cost tuition.
Mini Twos Age 2 by Mar. 1, 2025	9:00am-12:30pm 3 Days: 5 Days: 9:00am-3:00pm 3 Days: 5 Days:	\$8,000 \$11,225 \$10,450 \$14,800	
Twos Age 2 by Oct. 1, 2025	9:00am-12:30pm 3 Days: 5 Days: 9:00am-3:00pm 3 Days: 5 Days:	\$8,000 \$11,225 \$10,450 \$14,800	<u>Emergency Accommodations-</u> In the event that you have a child care emergency on which you are not registered for, accommodations are available. Please call the director for availability and pricing.
Threes Age 3 by Oct. 1, 2025	9:00am-3:00pm 3 Days: 5 Days:	\$10,450 \$14,800	
Superstars Age 4 by Oct. 1, 2025	9:00am-3:00pm 5 Days:	\$14,800	

PROGRAM: PLEASE CHECK CLASS

- | | |
|--|---|
| <input type="checkbox"/> MINI TWOS (9AM-12:30PM) | <input type="checkbox"/> MINI TWOS (9AM-3PM) |
| <input type="checkbox"/> TWOS (9AM-12:30PM) | <input type="checkbox"/> TWOS (9AM-3PM) |
| <input type="checkbox"/> THREES (9AM-3PM) | <input type="checkbox"/> SUPERSTARS (9AM-3PM) |

SHORTER, MORE AND/OR FEWER DAYS UPON REQUEST AND SUBJECT TO AVAILABILITY

PRICING UPON REQUEST

DAYS: PLEASE CHECK ALL DAYS OF ATTENDANCE:

- Monday Tuesday Wednesday Thursday Friday

TEMPLE MEMBER

NON-MEMBER

Total Program _____

Andrew Friedland Early Childhood Learning Center
Before Care & Aftercare Enrollment Form
2025-2026

Regular Hours for School Programs are as follows:

Mini Twos and Twos: 9:00am-12:30pm & 9:00am – 3:00pm

Threes: 9:00am-3:00pm

Fours: 9:00am-3:00pm

**If you require a pick-up after these times, you must enroll your child in aftercare.
Aftercare closes at 5pm.**

If you are more than 15 minutes late for your scheduled pick-up time, you will be charged for an additional hour.

Name: _____ Class: _____

Parent 1 Name: _____ Cell: _____

Parent 2 Name: _____ Cell: _____

Emergency Contact: _____ Cell: _____

Emergency Contact: _____ Cell: _____

Before Care 8:00am-9:00am

3 Days: \$1,560

5 Days: \$2,600

Aftercare 3:00pm-5:00pm

3 Days: \$3,120

5 Days: \$5,200

Pricing is subject to change based on availability and the specific details of your request. Please contact Hillary at any point in the school year to make any changes or additions.

Days and hours needed:

Monday: from _____ to _____

Tuesday: from _____ to _____

Wednesday: from _____ to _____

Thursday: from _____ to _____

Friday: from _____ to _____

Parent Signature: _____

Date: _____

Director Signature: _____

Date: _____