



# Revere Jewish Montessori Preschool

## 2023-2024

### Registration Packet

**Please complete and return all attached forms before your child's first day of school. Per Tennessee state requirements, you must submit a current copy of your child's immunization record.**

RJMPinfo@gmail.com

95 Bellevue Road, Nashville TN 37221

Visit us online: [www.Jewishmontessoripreschool.com](http://www.Jewishmontessoripreschool.com)

Office: 615-646-5750

Application

REVERE JEWISH MONTESSORI PRESCHOOL



Date of Application \_\_\_\_\_

1 year old enrolling for: Before Care \_\_\_\_\_ Preschool \_\_\_\_\_ After Care \_\_\_\_\_

2 years old enrolling for: Before Care \_\_\_\_\_ Preschool \_\_\_\_\_ After Care \_\_\_\_\_

3 – 5 years old enrolling for: Before Care \_\_\_\_\_ Preschool \_\_\_\_\_ After Care \_\_\_\_\_

Child's full name: \_\_\_\_\_

What does the child like to be called: \_\_\_\_\_

Spelling of Hebrew Name (in Hebrew if possible) \_\_\_\_\_

Sex: F M (circle one)

Date of birth: \_\_\_\_\_ born in the a.m. or p.m. (circle one)

PARENTS

Mother	Father
Address	Address
City State Zip	City State Zip
Home Phone	Home Phone
Cell Phone	Cell Phone
Where Employed	Where Employed
Email Address	Email Address

Who has custody of the child?  
\_\_\_\_\_

EMERGENCY INFORMATION

Name of person, other than parent, authorized to act for parent in an emergency: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Where employed: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Work Hours: \_\_\_\_\_

MEDICAL INFORMATION

Name of Physician: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Practice: \_\_\_\_\_

Application

Please list any allergies your child has (medications, foods, environmental elements, etc.)

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I do hereby authorize emergency medical care: \_\_\_\_\_  
Signature of Parent

**BACKGROUND INFORMATION**

Other children in family (name, birthdate, school):

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At what time does child eat breakfast: \_\_\_\_\_ Lunch: \_\_\_\_\_ Dinner: \_\_\_\_\_ Snacks: \_\_\_\_\_

What does child usually eat for breakfast?

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Bedtime schedule: Sleeps from \_\_\_\_\_ to \_\_\_\_\_

List some of your child's favorite activities:

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Has he/she been enrolled in other preschool programs? \_\_\_\_\_

Name of program: \_\_\_\_\_ For how long: \_\_\_\_\_

Does he/she play with other children from other families? \_\_\_\_\_ How well? \_\_\_\_\_

Does he/she go to the bathroom independently? \_\_\_\_\_ Does he/she need to be reminded or taken? \_\_\_\_\_

Does he/she manage clothes by him/herself? \_\_\_\_\_

The Revere Jewish Montessori Preschool has my permission to print a directory containing my name, address, telephone number, cell phone number and email address.

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Signature of Parent or Guardian

I consent to the use of my child's photograph without a name for social media, website, in-house, and newsletters.

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Signature of Parent or Guardian

2023 – 2024 Tuition Fee and Schedule

**Monthly Tuition & Fee Schedule, 5 days a week (MTWTF)**

Age Group	Registration Fee before March 1, 2023	Registration Fee after March 1, 2023	Monthly Tuition Preschool 9:00-3:00	Monthly Early Care 8:00-9:00*	Monthly After Care 3:00-4:00** M/Tu/Wed/Thu	Late Fee (payment received after 5 <sup>th</sup> of month)
All Ages	\$150	\$250	\$1089	\$225	\$240	\$50

**Monthly Tuition & Fee Schedule, 5 days a week ½ Day 9 am -12:30 pm**

Age Group	Registration Fee before March 1, 2023	Registration Fee after March 1, 2023	Monthly Tuition Preschool	Monthly Before Care 8:00-9:00*	Monthly After Care 3:00-4:00** M/Tu/Wed/Thu	Late Fee (payment received after 5 <sup>th</sup> of month)
1 -2 yr.	\$150	\$250	\$816	\$225	N/A	\$50

**Monthly Tuition & Fee Schedule, 3 days a week (MWF)**

Age Group	Registration Fee before March 1, 2023	Registration Fee after March 1, 2023	Monthly Tuition Preschool	Monthly Before Care 8:00-9:00*	Monthly After Care 3:00-4:00** M/Tu/Wed/Thu	Late Fee (payment received after 5 <sup>th</sup> of month or
1-3 yr.	\$150	\$250	\$777	\$140	\$180	\$50

**Monthly Tuition & Fee Schedule, 3 days a week ½ Day (MWF) 9am-12:30 pm**

Age Group	Registration Fee before March 1, 2023	Registration Fee after March 1, 2023	Monthly Tuition Preschool	Monthly Before Care 8:00-9:00*	Monthly After Care 3:00-4:00** M/Tu/Wed/Thu	Late Fee (payment received after 5 <sup>th</sup> of month)
1-2 yr.	\$150	\$250	\$490	\$140	N/A	\$50

**Note: Children enrolled in the 5 days a week program will be given priority.**

**Tuition is due on the 1<sup>st</sup> of each month. We realize that there are times when situations arise and you may need an alternative pay schedule. Exceptions can be made on a very limited basis, however not every month.**

2023 – 2024 Tuition Fee and Schedule

1. **Registration for FIRST TIME STUDENTS:** Registration begins in February for the following school year. A non-refundable registration fee of \$250.00 per child will be due at the time of registration which will temporarily add your child's name to the class list. To guarantee enrollment for your child, both the first and last month's tuition AND a thoroughly completed registration packet must be turned in before April 1<sup>st</sup>. If the tuition and paperwork are not received by then, your child will be moved to the wait list and enrollment is subject to space available at the time the paperwork and tuition are received. The last month tuition payment refers to the last month of enrollment at the SCHOOL, not the last month of the current school year. Our program runs August – June and is closed for July (no tuition due for July).
2. **Registration for RETURNING STUDENTS:** Registration begins in February for the following school year. Please return the completed registration packet to the Chabad office before March 1, 2023. After submitting your paperwork, you will then make your \$150.00 registration fee payment or \$250 after March 1, 2023, on the Brightwheel app. This must be done to guarantee class placement. If a completed registration packet is not received by then, your child will be moved to the wait list and enrollment is subject to space available at the time the paperwork is received. Our program runs August – June and is closed for July (no tuition due for July).
3. All tuition payments for the 2023-2024 school year will be made through a third-party tuition collection service. All tuition payments must be made directly on the Brightwheel app. You will have the option of paying by credit card or electronic withdrawal from your bank account. For your convenience, automatic payments may also be set up. When new families enroll, they will receive an introductory email from Brightwheel with instruction for downloading and creating a Brightwheel account.
4. **Monthly tuition payments are due on the 1st of the month.** A late fee of \$50 will be applied to accounts not paid by the 5<sup>th</sup> of each month.
5. Delinquent accounts can result in withdrawal from the preschool until payment is made and classroom availability exists. Emergency situations should be discussed with the Preschool Director.
6. All children should be picked up by 3:00 or 4:00 pm\*. A late pick up charge of \$25 per child will be assessed 15 minutes after closing time. An additional \$5 fee will be charged for each ten-minute segment thereafter. Late fees will need to be paid the week in which they occur.
7. In order to maintain your child's place on a class roll, **tuition must be paid even if your child does not attend.**
8. There is a \$30 fee charged for returned checks.

**\*\*\*NO aftercare on Fridays\*\*\***

Policy Acceptance

Dear Parents,

The State of Tennessee, Department of Human Services, requires that you sign a statement indicating that you have read the policies of Revere Jewish Montessori Preschool, the summary of licensing requirements for child care centers and have made a pre-placement visit to Revere Jewish Montessori.

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Child's Name

I have read the policies of Revere Jewish Montessori, the summary of licensing requirements for child care centers and have made a pre-placement visit to Revere Jewish Montessori Preschool.

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Date

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Parent's Signature

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Parent's Printed Name



Drop off/Pick up Authorization form  
2023-2024 school year

In the event you are unable to drop off or pick up your child, we ask that you fill out this form. Please list the names of the people below that you would like to be given authorization to pick up your child.

Child's Name:

Parent(s):

Cell phone number:

Work Number:

1.Name:

Cell phone number:

2.Name:

Cell phone number:

3. Name:

Cell phone number:

Parent signature:

Date:



I give The Revere Jewish Montessori Preschool staff permission to apply sun screen to my child as needed for his/her protection from the sun.

\_\_\_\_\_

Childs Name

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date



I give The Revere Jewish Montessori Preschool staff permission to apply Arnica-Salbe-Heel to my child in the event of a fall or accident causing minor scrapes and or bruising.

\_\_\_\_\_

Child's Name

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date





## **Influenza Information Notification Form**

PUBLIC CHAPTER 687 requires the Department of Human Services and the Department of Health to work together to educate parents of children in child care agencies regarding the importance of immunizing their children against influenza. The Department of Human Services works with child care agencies to ensure that this information is distributed annually to parents in August or September.

**I/We acknowledge that we have received information on the importance of immunizing children against influenza.**

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**Signature of Parent or Legal Guardian**

**Date**

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**Signature of Parent or Legal Guardian**

**Date**

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**Signature of Agency Representative**

**Date**

Withdrawal Policy

If it becomes necessary to withdraw your child from the preschool, you must notify the Director in writing one month in advance. If no notice is provided you will still be responsible for your monthly tuition payments for the remainder of the school year.

**Monthly tuition payments are still due if your child is out of school for an extended period of time.**

I HAVE READ AND UNDERSTAND THE ABOVE PAYMENT AND WITHDRAWAL POLICY, AND I AGREE TO ABIDE BY THESE POLICIES AND REGULATIONS.

Printed Name of Parent or Guardian: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Checklist and Program Selection

Yes, our child, \_\_\_\_\_ will attend the Revere Jewish Montessori Preschool beginning on \_\_\_\_\_.

Please select your program from below then add the row for your total monthly tuition.

Age	Base Cost Monthly	Program	Half Day Full Day	Before Care Monthly	After Care* Monthly	Total
1-3 yr. old	\$1089	Monday - Friday	Full Day	\$225	\$240	
1-2 yr. old	\$816	Monday-Friday	Half Day	\$225	N/A	
1-3 yr. old	\$777	Monday Wednesday Friday	Full Day	\$140	\$180	
1-2 yr. old	\$490	Monday Wednesday Friday	Half Day	\$225	N/A	
4-5 yr. old	\$1089	Monday-Friday	Full Day	\$225	\$240	

\*There will be no after care on Fridays.

I will pay the non-refundable registration fee of \$150 on Brightwheel before or on April 1, 2023, \$250 after April 1, 2023

FIRST TIME STUDENTS ONLY: I will make a payment on Brightwheel for the equivalent of the registration fee and the first and last month's tuition. I understand our registration is not complete until this is received.

Enclosed the following forms: Registration check list, Application, Health History, Immunization Record, Policy Acceptance, Influenza Notification form, Withdrawal Policy, Sunscreen and Arnica permission slip.