



Dear Families,

The time has come – we are excited to share registration materials for the 2021-2022 school year! This past year was my first as ECC Director and it has been both a learning experience and a privilege to lead our school through this challenging time.

As we open registration for the fall, the pandemic is still not resolved. We continue to work closely with Temple, which includes consulting with our Medical Advisory Panel, to ensure that our students, families, staff, and community are as safe as possible.

Although our plans will certainly evolve during the course of the year, we are prepared to open school with our Covid-19 Safety Protocols in place. Among other precautions, that means that ...

1. Each class will function as a pod and we will not move children between classes.
2. You may register for either Monday-Friday, or Monday/Wednesday/Friday.
3. You may choose 9:00-12:30 or 9:00-3:00.

For now, we are not able to offer Early Care or After Care.

As the numbers in Michigan improve, we will be eager to expand our program with more options. Your children are precious to us, and we value being an essential part of their early life experiences. I am confident that all of us can take pride in being partners, offering our preschoolers vital in-person learning experiences, and supporting one other in this special community.

Forest Levy Wolfe

Director, Early Childhood Center

Temple Beth El

[www.tbeonline.org/ecc](http://www.tbeonline.org/ecc)

248.325.9702

**Temple Beth El Early Childhood Center - Bloomfield Hills, Michigan**  
**APPLICATION FOR ADMISSION**  
**September 2021 – June 2022**



Please list primary school contact as Parent 1

Parent 1 Name

Parent 2 Name

Parent 1 Cell

Parent 2 Cell

Parent 1 - other phone number (home / work)

Parent 2 - other phone number (home / work)

Parent 1 Email

Parent 2 Email

Address

City

State / Zip

Name(s) of Child(ren) who will be enrolling in September

Child (1) Name

Child (2) Name

**Terms of Enrollment**

- 1) Tuition must be paid in full by August 15, 2021 unless you have elected to submit a Tuition Payment Schedule Application or other arrangements have been made with the Temple's Executive Director. Enrollment is subject to cancellation if tuition obligations are not met. New applications for Camp, the following school year, and Fun Days will not be accepted until unpaid balances have been paid.
- 2) A \$200 non-refundable deposit must accompany this application. (Deposit will be applied toward tuition.)
- 3) A 10% sibling discount will be applied when multiple members of the same household attend the ECC simultaneously.
- 4) **There are NO tuition adjustments, refunds or "make-up" days because of absence, illness, family vacations, or withdrawing from the school.** However, a prorated refund will be granted if a family moves out of the local area.
- 5) If a child is unable to "adjust" to our program (as determined by the ECC team) after the first month of school, arrangements to withdraw the child may be made after appropriate review and consultation with the parents. A prorated tuition adjustment will be refunded.
- 6) Enrollment is subject to cancellation if the immunization requirements are not met or required medical and child information forms are not submitted by the start of school.

**I accept the Enrollment Terms of Temple Beth El Early Childhood Center.**

Parent Signature

Date

Send to Attn: Forest Wolfe, ECC Director  
Jennifer Goren, ECC Administrator  
Temple Beth El Early Childhood Center  
7400 Telegraph, Bloomfield Hills, MI 48301

fwolfe@tbeonline.org  
jgoren@tbeonline.org  
Phone: 248-865-0611 Fax: 248-851-1187  
Website: www.tbeonline.org

Child 1's Name

Date of Birth

Gender

Previous Preschool experience? If so, where?

Intended Elementary School?

Does your child have any challenges, allergies or is there other information we should be aware of: (please describe below)

Child 2's Name

Date of Birth

Gender

Previous Preschool experience? If so, where?

Intended Elementary School?

Does your child have any challenges, allergies or is there other information we should be aware of: (please describe below)

### Temple Beth El Early Childhood Center 2021-2022

**MORNING SESSION 9:00 am – 12:30 pm**

**AWESOME AFTERNOONS 12:30 – 3:00 pm**

Please select ONE option per student:	5 Day Program Rate M-F		3 Day Program Rate MWF	
	Member	Guest	Member	Guest
Child 1				
9:00 am – 12:30 pm	<input type="checkbox"/> \$5,400	<input type="checkbox"/> \$6,400	<input type="checkbox"/> \$4,150	<input type="checkbox"/> \$5,050
9:00 am – 3:00 pm	<input type="checkbox"/> \$10,150	<input type="checkbox"/> \$12,050	<input type="checkbox"/> \$7,515	<input type="checkbox"/> \$9085

Please select ONE option per student:	5 Day Program Rate M-F		3 Day Program Rate MWF	
	Member	Guest	Member	Guest
Child 2				
9:00 am – 12:30 pm	<input type="checkbox"/> \$5,400	<input type="checkbox"/> \$6,400	<input type="checkbox"/> \$4,150	<input type="checkbox"/> \$5,050
9:00 am – 3:00 pm	<input type="checkbox"/> \$10,150	<input type="checkbox"/> \$12,050	<input type="checkbox"/> \$7,515	<input type="checkbox"/> \$9085

Are you a TBE member?  Yes  No

Are you a member of another congregation?  Yes  No

Which Congregation? \_\_\_\_\_

Do you give permission for your information to be included in a class list?  Yes  No

Tuition (please check appropriate rates)

*Families joining Temple Beth El on / before November 1<sup>st</sup> are entitled to the membership rate for the entire 2021-2022 school year.  
Families joining Temple Beth El after November 1<sup>st</sup> will be given a pro-rated member fee for the rest of the 2021-2022 school year.*



**Temple Beth El Early Childhood Center 2021 – 2022**  
**Billing Information**  
**Please fill out 1 per family**  
(please type or print clearly)

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Parent Name

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Address

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City

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State / Zip

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**Child's Name (Child 1)**

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**Date of Birth**

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**Age (at the start of school)**

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**Child's Name (Child 2)**

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**Date of Birth**

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**Age (at the start of school)**

Other children in the family

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Name

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Date of Birth

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Name

---

Date of Birth

---

Name

---

Date of Birth