



Dear Parents:

Attached please find registration materials for the 2018-19 school year and the 2018 Summer Program. We are pleased to announce that we will be having programming for Infant/Toddlers (6 weeks-24 months) in addition to our Early Learners and Young Explorers classes. We will be having Summer programming for children 18 months through five years old. Please note the new hours of our Summer program are 9:00 a.m.-3:00 p.m. with before and aftercare available.

We are pleased to offer you an early bird discount for those registering for our Nursery School and Summer program. Registrations received by Friday, January 12th for the full 8-week summer program and the 5 day a week 2018-19 school year will receive a \$100 savings off of the nursery school registration.

We look forward to having your children with us.

Deena Jarashow and Lillie Mentzel
Directors



Leah Sokoloff Nursery School Summer 2018

19-10 Morlot Ave Fair Lawn, NJ 07410 (201) 791- 6744
Administrators: Deena Jarashow/Lillie Mentzel Rabbi: Benjamin Yudin
email: lsnspreschool@gmail.com

APPLICATION FOR SUMMER PROGRAM Please use a separate form for each child.

Last Name: _____ First name: _____

Nickname: _____ Hebrew Name: _____

English Birth Date: _____ Hebrew Birth Date: _____

Home Address: _____

Home Telephone Number: _____

MOTHER'S NAME: _____ FATHER'S NAME: _____

Occupation: _____ Occupation: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

E-Mail: _____ E-Mail: _____

GRANDPARENT'S NAME: _____ GRANDPARENT'S NAME: _____

Address: _____ Address: _____

Child's Physician: _____

Address: _____

Phone: _____

Health Information—Are there any medical, special or chronic conditions or considerations (allergies, asthma, diabetes, developmental issues, physical limitations, etc.) of which we should be aware?

People authorized to pick up child and/or contact in case of emergency (if parents can't be reached). At least one of these contacts needs to be local:

Name: _____	Address: _____
Phone: _____	Relationship: _____
Name: _____	Address: _____
Phone: _____	Relationship: _____

Previous Nursery and Playgroup Experience:

Synagogue Affiliation: _____

Name of Rabbi: _____

Other children in family (names, ages and schools attending):

Primary language spoken at home: _____
How did you hear about Leah Sokoloff Nursery School?

Please use this space if you would like to give us additional information about your child (i.e. special needs, likes and dislikes, etc.)

LSNS SUMMER PROGRAM 2018

Pre-Summer Kaytana
June 18-June22 - 9am-3pm \$225

Eight Weeks of Summer Fun 9am-3pm	
Full Summer – June 25-August 17	\$1500
Session 1 – June 25-July 20	\$850
Session 2 – July 23-August 17	\$850
Summer Plus- August 20-24	\$225
Weekly Pricing	\$225

Extended Care is available at the rate of \$10/hour from 7:00-9:00am & from 3:00-6:00pm. (Fridays until 4:00pm)

I am registering for:
Pre-Summer Kaytana 6/18-6/22- _____
Eight Week Summer Session 6/25-8/17 _____
Four Week Summer Session One 6/25-7/20 _____
Four Week Summer Session Two 7/23-8/17 _____
Summer Plus Week 8/20-8/24 _____
Weekly Rate: Please specify the weeks on the line provided _____

One half of the summer tuition is due by January 12, 2018 and the second half of the summer tuition is due by May 11, 2018.
(All checks are non-refundable and non-transferable once deposited)

You may list two children who wish to be together with your child. We can guarantee that your child will be placed with at least one of the children requested.

1. _____
2. _____

Parent's signature: _____ Date: _____
Parent's signature: _____ Date: _____

Shomrei Torah, the Orthodox Congregation of Fair Lawn, admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the corporation's school programs. The corporation's school programs do not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, scholarship and loan programs, and athletic programs and other school-administered programs.



Leah Sokoloff Nursery School

Of Shomrei Torah

19-10 Morlot Ave Fair Lawn, NJ 07410

Administrator:

Deena Jarashow/Lillie Mentzel

Educational Consultant:

Esther Feil

(201) 791- 6744

Rabbi: Benjamin Yudin

email: lsnspreschool@gmail.com

APPLICATION FOR ADMISSION

2018-2019

Please use a separate form for each child.

Last Name: _____ First name: _____

Nickname: _____ Hebrew Name: _____

English Birth Date: _____ Hebrew Birth Date: _____

Home Address: _____

Home Telephone Number: _____

MOTHER'S NAME: _____ FATHER'S NAME: _____

Occupation: _____ Occupation: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

E-Mail: _____ E-Mail: _____

Grandparent's name: _____ Grandparent's name: _____

Address: _____ Address: _____

CHILD'S PHYSICIAN: _____

Address: _____

Phone: _____

Health Information – Are there any medical, special or chronic conditions or considerations (allergies, asthma, diabetes, developmental issues, physical limitations, etc.) we should be aware of?

People authorized to pick up child and/or contact in case of emergency (if parents can't be reached) at least one of the contacts needs to be local:

Name: _____ Address: _____
Phone: _____ Relationship: _____

Name: _____ Address: _____
Phone: _____ Relationship: _____

Previous nursery and playgroup experience: _____

Synagogue Affiliation: _____
Name of Rabbi: _____

Other children in family (names & ages & schools attending): _____

Primary language spoken at home: _____

How did you hear about Leah Sokoloff Nursery School?

Please use this space if you would like to give us additional information about your child (i.e. special needs, likes and dislikes, etc.):

Infant/Toddler (6 weeks-24 months):	Days Attending _____	Hours Attending _____
Early Learners (2s and Younger 3s)	Days Attending _____	Hours attending _____
Young Explorers (Older 3s & 4s)	_____	
Extended Care hours (if known)	Days attending _____	Hours Attending _____
SEE HOURS AND FEES PAGE		

Registration fee of \$300 (\$200 for full Shomrei Torah members) is enclosed as follows:

____ Enclosed is my early-bird (prior to January 12, 2018) registration payment for the 2018-2019 school and 2018 8-week summer program in the amount of _____.

____ Enclosed is my registration payment the 2018-2019 school year in the amount of _____.

(All checks are non-refundable and non-transferable once deposited.)

Parent's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

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Hours and Fees

2018-2019
5778-5779

We are pleased to offer you the following tuition options:

INFANT/TODDLER (6 weeks-24 months)		and	EARLY LEARNERS (2s and Younger 3s) CLASS	
Mon. - Fri.	9:00 AM - 12:00 PM			\$4,600
	9:00 AM - 1:00 PM (Lunch Bunch)			\$5,670
	9:00 AM - 2:00 PM*			\$6,800
Mon., Wed., Fri.	9:00 AM - 12:00 PM			\$3,250
	9:00 AM - 1:00 PM (Lunch Bunch)			\$3,970
	9:00 AM - 2:00 PM*			\$4,580
Tue., Thu.	9:00 AM - 12:00 PM			\$2,170
	9:00 AM - 1:00 PM (Lunch Bunch)			\$2,650
	9:00 AM - 2:00 PM*			\$3,060

* 1:00 PM Early Friday Dismissal during Standard Time

There can be no substitution or swapping of days for children registered for less than a full week

YOUNG EXPLORERS (Older 3s and 4s) CLASS	
Mon. - Fri.	9:00 AM - 2:00 PM* \$6,800

* 1:00 PM Early Friday Dismissal during Standard Time

Registration fee of \$300 per student (\$200 for full Shomrei Torah members) is additional.

EXTENDED CARE:**

Add any set number of additional hours to the nursery school program from 7:00- 9:00 am and 2:00-6:00pm for the entire academic year as follows:

- 1 hour increments - \$800 above tuition
- ½ hour increments - \$650 above tuition

DROP-IN RATE is \$15 per hour (or any fraction of an hour) for additional hours between 7:00 am - 9:00 am and 2:00 pm - 6:00 pm with confirmation by the school.

Please be aware of the following early dismissal times. For those using extended care Fridays, during daylight savings time the school closes at 4:00 pm and during standard time at 3:00 pm.

EREV YOM TOV, CHOL HA'MOED SUKKOT AND WINTER BREAK SCHEDULE AND FEES:**

We are pleased to offer you child care coverage on Erev Yom Tovim (no coverage Erev Pesach), Chol Hamoed Sukkot and Winter Break from 8 am-1 pm at the following additional cost:

- \$10 per hour (minimum of 4 hours per day)
- \$400 for the entire package

**ALL ADDITIONAL HOURS and DAYS MUST HAVE A REGISTRATION OF A MINIMUM OF 3 STUDENTS

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