

**The Village Shul Tots Together 2012-2013**  
**Application for Enrolment**

Welcome to The Village Shul Tots Together program. Please read the following conditions of enrolment carefully.

1. Space in the program is limited. Admittance to the program is on a first come first serve basis and applications must be received no later than Tuesday, September 4, 2012.
2. If your application is received after all spaces have been filled and before the September 4, 2012 deadline, your child will be placed on our waiting list and we will notify you to this effect.
3. The registration form must be filled out completely and signed as indicated. A separate form must be completed for each child.
4. All required fees must accompany this application (see Financial Information sheet).
5. The pre-school coordinator will consider requests for class placement. However these requests are not guaranteed. The final decision is up to the discretion of the coordinator.
6. Please keep a copy of the application for your records (all pages).

**FEE SCHEDULE FOR VILLAGE SHUL TOTS TOGETHER 2012/2013**

<b>Program</b>	<b>Member</b>	<b>Non-Member</b>
2-day January start (2 years old by March 31, 2013)	\$1,830	\$2,090

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**Application Checklist**

- Application **COMPLETELY** filled out
- Application **SIGNED** on page 3
- Financial Information Sheet (page 4) **SIGNED** and **COMPLETED** (please keep a copy for your records)
- Cheque for \$500 dated with the same date as the application **ENCLOSED**
- Cheque for \$500 dated September 4, 2012 **ENCLOSED**

**The Village Shul**  
A Unique Family Synagogue  
1072 Eglinton Ave. W., Toronto, Ontario M6C 2E2  
(416) 785-1107, ext. 201 Fax (416) 783-9870

**The Village Shul Tots Together 2012-2013**  
**Application for Enrolment**  
(Please print)

**Village Shul member?**

Yes  No

**Family Name** \_\_\_\_\_

**Child's Name** \_\_\_\_\_

**Child's Hebrew Name** \_\_\_\_\_

**Child's Date of Birth:** Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

M  F

**Child's Home Address** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Child's Home Phone** \_\_\_\_\_

**Parent #1 Full Name** \_\_\_\_\_ **Cell Number** \_\_\_\_\_

**Work Number** \_\_\_\_\_ **Work Address** \_\_\_\_\_

**Parent # 1 email** \_\_\_\_\_

**Parent #2 Full Name** \_\_\_\_\_ **Cell Number** \_\_\_\_\_

**Work Number** \_\_\_\_\_ **Work Address** \_\_\_\_\_

**Parent # 2 email** \_\_\_\_\_

**Marital status** \_\_\_\_\_

**If separated or divorced, parent's address if different from above:**

\_\_\_\_\_

**Doctor's Name** \_\_\_\_\_ **Telephone** \_\_\_\_\_

**Doctor's Address** \_\_\_\_\_

**Child's OHIP Number (include version code if applicable)** \_\_\_\_\_

**Does your child have any allergies? (Please list)** \_\_\_\_\_

**List any special medical information, special diet, or rest requirement for your child.**

\_\_\_\_\_

**List any preference for class placement with a special friend** \_\_\_\_\_

*Office Use Only*

Date App. Rec'd _____	Member / Non-member (circle)
Tuition charge \$ _____	Date of Admission _____
Deposit #1 Rec'd _____	Deposit # 2 Rec'd _____
P/D chqs Rec'd _____	Age on 31/03/13 (months) _____
Approved by _____	

The Village Shul Tots Together 2012-2013  
**Application for Enrolment**  
(Please Print)

Emergency contacts if parents cannot be reached:

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Telephone number(s) \_\_\_\_\_

.....  
Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Telephone number(s) \_\_\_\_\_

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Individuals to whom your child may be released:

Name	Relationship
_____	_____
_____	_____
_____	_____

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I have read, understood, and agree to the above conditions of enrolment and confirm the truth and accuracy of all information provided in this application form *(except in the case of a single parent family, both parents must sign the application form).*

Parent # 1:

Name: \_\_\_\_\_  
(please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

.....  
Parent # 2:

Name: \_\_\_\_\_  
(please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**The Village Shul Tots Together 2012-2013**  
**Financial Information Sheet**

1. Two (2) \$500 post-dated deposits must accompany each application form and are applied toward tuition. The first cheque should have the same date as the application. The second cheque should be dated September 4, 2012.
2. Fees are determined on an academic year basis and take into account the length of the school months and the number of holidays or other days off during the school year.
3. The balance of payment may be made in full in a single payment dated January 1, 2013 or alternatively, you may provide two (2) post-dated cheques for January 1, 2013 and April 1, 2013. All post-dated cheques must be received by **NOVEMBER 1, 2012** (see cheque amount calculator below).
4. If you withdraw your child prior to the September 4, 2012 deadline, your full deposit will be returned. If you withdraw your child from September 4, 2012 and prior to October 1, 2012, you will receive a refund of \$500 and a tax receipt for \$500. If you withdraw your child from October 1, 2012 to December 31, 2012, your \$1,000 deposit will not be returned, but you will receive a tax receipt for \$1,000.
5. If you withdraw your child once the program has begun and prior to March 1, 2013:
  - a. one month's written notice is required;
  - b. the \$1,000 deposit is forfeit;
  - c. the remaining post-dated cheques will be returned to you for those full months following termination of enrolment less the amount for service rendered;
  - d. a tax receipt will be issued for the difference between the amount retained and service rendered to the end of the month of withdrawal.
6. If you withdraw your child after February 28, 2013, there will be no refund, and a tax receipt will be issued for the difference between the amount retained and service rendered to the end of the month of withdrawal.
7. An additional charge of \$20 will be applied if cheques are returned N.S.F.
8. Fees are non-transferable.

**Two Cheque Calculator**

Program Fee	\$ _____
Less: 2 x \$500 deposit	(1,000.00)
Remaining Balance	\$ _____
Divided by 2	_____ ÷ 2
2 cheques in the amount of	\$ _____

I have read, understood, and agree to the above financial conditions (except in the case of a single parent family, both parents must sign).

**Parent # 1:**

Name: \_\_\_\_\_  
(please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Parent # 2:**

Name: \_\_\_\_\_  
(please print)

Signature \_\_\_\_\_ Date \_\_\_\_\_