

2014-15 Application for Admission  
3 Year Olds  
CBT Members



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North Brunswick, NJ 08902  
(732) 297-0295  
Fax: (732) 297-2673  
Email: [nursery@bnaitikvah.org](mailto:nursery@bnaitikvah.org)  
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Phyllis G. Denenberg - Director

**Phyllis G. Denenberg - Director**

January 2014

Dear Parents,

Welcome to the 2014-2015 school year at the JCC of North and South Brunswick Nursery School. Established in 1975, our state-licensed, nursery school believes that a high quality Jewish Early Childhood program creates a safe and nurturing school community for young children that fosters life-long learning and emotional well-being. We are committed to promoting each child's cognitive, physical, social, and emotional development. Our population is non-sectarian. We recognize and respect that each child brings to school a unique rate of development, a desire to learn, with diverse languages and cultural experiences.

The Early Childhood program strives to empower parents to become partners in the education of their children. The major determinants of program quality are:

- The appropriate application of well-researched and proven child development practices that recognize play as the natural way through which children learn
- An integrated curriculum that provides opportunities for children to be successful by constructing their own knowledge through meaningful interactions with adults, other children and materials
- Activities that are relevant and engage children with hands-on experiences that encourage progression along the developmental continuum from dependence to independence
- Opportunities for purposeful and imaginative-creative play in a language and literacy rich environment
- A balanced daily program of child-initiated and adult-directed activities, including individual, small and large group activities that develop kindergarten readiness skills
- The recognition that parental involvement is vital for the educational success of children

We will maintain open communication between parents and our staff and encourage you to contact the teachers with any questions or concerns you may have. Feel free to contact me by email or phone or meet with me at any time. Parent-Teacher conferences are scheduled two times during the school year but you may set up additional time with your child's teacher should you need it. We will be emailing a weekly newsletter from your child's teacher keeping you up to date with what the children have been doing.

**We welcome you & your child to our nursery school family and look forward to another exciting school year.**

**Sincerely,**



**Phyllis G. Denenberg  
Early Childhood Director**

APPLICATION FOR 2014-15 SCHOOL YEAR (3 Year Olds)

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Nickname (if any): \_\_\_\_\_ Child's Age as of 9/14: \_\_\_\_\_

Hebrew Name (if any): \_\_\_\_\_ Gender: M / F

Street Address: \_\_\_\_\_ Language(s) spoken at home: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Mother's Information:**

Dr. \_\_\_ / Mrs. \_\_\_ / Ms. \_\_\_

Name: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Email: \_\_\_\_\_

Employer Name: \_\_\_\_\_

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

**Father's Information:**

Dr. \_\_\_ / Mr. \_\_\_

Name: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Email: \_\_\_\_\_

Employer Name: \_\_\_\_\_

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

**Sibling(s) (if any):**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M / F

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M / F

**Pediatrician Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

APPLICATION FOR 2014-15 (3 Year Olds)

Has your child had any previous schooling? \_\_\_\_\_ At what age? \_\_\_\_\_

Is your child toilet-trained? Yes / No

Does your child have any diagnoses – physical, medical or emotional – that we should be aware of? If yes, please specify: \_\_\_\_\_

Dietary Restrictions (if any): \_\_\_\_\_

Allergies (if any): \_\_\_\_\_

Please describe any special family situation we should be aware of (if any): \_\_\_\_\_

Please give a brief description of your child's personality: \_\_\_\_\_

**Primary Emergency Contact:**

**Secondary Emergency Contact:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Email / Phone (in order of priority):

Email / Phone (in order of priority):

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

Will your child be picked-up or dropped-off on a regular basis by anyone other than their Mother or Father? If yes, please complete the following:

Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Parent signature(s) authorizing the JCC of North & South Brunswick Nursery School to release your child to the care of any / all of the above parties:

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

## MONTHLY RATES (CBT MEMBERS) – 3 Year Olds

Thank you for considering the JCC of North & South Brunswick Nursery School.  
 Since 1975, we have cared for and educated over thousands of area children, and we take great pride in the quality of our teachers, facility, and programs. In fact, many of our teachers have over 20 years of experience.

We also have the only full-size gymnasium in the area – so when it’s raining or snowing, or just too cold to go outside, your child will still be able to exercise and play indoors.  
 Last but certainly not least, our prices are all-inclusive – they include all trips, plus music, yoga, soccer and special programs. In short, the JCC of North & South Brunswick Nursery School is an investment in your child’s future – one that will pay dividends for years to come.

FULL DAY 9AM – 3:15PM (Includes all Lunch Supervision & Enrichment programs)	“EARLY BIRD” DISCOUNT #1 Good Thru February 13	“EARLY BIRD” DISCOUNT #2 Good Thru March 13	STANDARD RATE
Monday through Friday	\$769	\$779	\$789

### MORNING-ONLY 9AM – 12PM

Monday, Wednesday, Friday	\$319	\$329	\$339
Monday through Friday	\$433	\$443	\$453

### Lunch (12:00 pm-12:45 pm)

\$4 per day for (1) lunch period per week	\$16
\$4 per day for (2) lunch periods per week	\$32
\$4 per day for (3) lunch periods per week	\$48
\$4 per day for (4) lunch periods per week	\$64
\$4 per day for (5) lunch periods per week	\$80

Enrichment (12:45 pm-3:15 pm)	DAILY RATE
Once per week -	\$65 per payment (\$80 per payment for GYMNASTICS)
Two times per week	\$130 per payment (\$145 per payment if GYMNASTICS is chosen)
Three times per week	\$195 per payment (\$210 per payment if GYMNASTICS is chosen)
Four times per week	\$260 per payment (\$275 per payment if GYMNASTICS is chosen)
Five times per week	\$340 per payment

EARLY / LATE STAY	HOURLY RATE
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Available Monday thru Friday	\$7 Contractual \$9 Drop-In Rate	Early Stay: 7:30-9AM / Late Stay: 3:15-6:30PM
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## Children's Creative Afternoon Enrichment Programs

### Class Selections for 3's Students

(all classes are contingent upon sufficient enrollment)

Day (All classes are 12:45-3:15)	Enrichment Program	Class Description
Monday	Curiosity Club	Join the club and learn all about our world. Our budding scientists will explore topics such as our solar system, the human body, magnetism, colors, plants and more. Experiment, songs, games and crafts are all part of the excitement.
Tuesday	Imagination Station	Connect with our crew as we create our own beautiful masterpieces. We will incorporate a variety of art media and techniques, including painting, printing, clay, weaving, recyclables and nature. All of these are combined with the most important tool for creating amazing art – an active imagination!
Wednesday	Passport to Adventure	It's a small world traveling across the USA and other countries. With passports in hand and suitcases packed, our little travelers will learn about places, people and cultures. The adventure will be completed with crafts, cooking and songs.
Wednesday	Jewish Enrichment Gan Aleph Bet	Learn the Aleph Bet (alphabet) and counting in Hebrew too! An in-depth immersion in Jewish values, holidays, traditions, customs and celebrations. Through stories, songs, crafts and games your child will learn their Jewish roots. The quality of your family's Jewish life will be enhanced as you share what they learn in class. Your child will be proud to be Jewish!
Thursday	Story Network	Story Network is a fun and exciting children's literature program. Many hands-on activities, including art, cooking, and creative story time extenders will spark young imaginations and expose preschoolers to the joys of early literacy. Songs, poetry and dramatization add to the excitement!
Friday	Gymnastics	Fun 4 Fitness will lead the children in gymnastics activities which will include tumbling, cartwheels, headstands, hand stands, balance coordination and games to build self-esteem, coordination and large motor development.

## IMPORTANT NOTES – EARLY / LATE STAY

RATES / BILLING	
RATES	Registration for Early / Late Stay is on a contractual basis. The hourly rate of \$7.00 is billed in half-hour increments (at \$3.50 per ½-hour). For example, if your child is in our care from 7:30-9AM, the total cost is \$10.50 (\$7.00 for 1-hour plus \$3.50 for one half-hour).
CHANGES	To ensure proper staffing levels, 30-days written notice is required for any changes.
BILLING	Early / Late Stay will be included in your monthly tuition bill. During Winter Hours (see below), a \$10.00 allowance will appear on your bill to reflect our reduced hours.
‘DROP-IN’ SERVICE	Any parent wishing to use Early / Late Stay on a non-contractual basis (also known as pay-per-use or “drop-in”) is welcome to do so at a rate of \$9.00 per hour or any part thereof. The charge for this service will appear on your monthly bill.

HOURS	
STANDARD HOURS	Early Stay is available Monday through Friday from 7:30AM until 9:00AM. Late Stay is available Monday through Friday from 3:15PM until 6:30PM, except during Winter (see below)
WINTER HOURS	When days are “shorter” during the winter months, Shabbat begins much earlier on Friday evenings. Therefore, Late Stay on Fridays from November through February ends at 4:00PM.
INCLEMENT WEATHER	The Nursery School follows the lead of the North Brunswick School District (NBSD) when it comes to closings. If the NBSD announces a delayed opening, Early Stay will start at 8:30AM. If we have early dismissal, there is no Late Stay.

CONTACT INFO	
REGULAR HOURS	If you need to reach the Nursery School Director during regular hours (9AM-4:00PM), please call (732) 297-0295 or email <a href="mailto:nursery@bnaitikvah.org">nursery@bnaitikvah.org</a>
EARLY / LATE STAY	If you need to reach the Early / Late Stay teacher before 9AM or after 4PM, please call (732) 297-0295 Extension 24 or call the B’nai Tikvah office at (732) 297-0696.

## APPLICATION FOR 2014-15 (3 Year Olds)

SCHEDULE OVERVIEW	Monday	Tuesday	Wednesday	Thursday	Friday
Core Curriculum (9AM-12PM)					
Lunch (12:00 pm-12:45 pm)					
Enrichment (12:45 pm-3:15 pm)					
Early Stay (7:30-9AM) Please indicate drop-off time: _____					
Late Stay (3:15-6:30PM) Please indicate pick-up time: _____					

### REGISTRATION NOTES

IMPORTANT DATES	Applications will be accepted for the 2014-15 school year as follows: Monday, January 6, 2014: Currently-enrolled students Monday, January 27, 2014: All other prospective students
AGE REQUIREMENTS	Children must be 3-years by: <b>October 1<sup>st</sup></b> if you are a <u>Princeton</u> resident <b>October 1<sup>st</sup></b> if you are a <u>North Brunswick</u> resident <b>October 31<sup>st</sup></b> if you are an <u>East Brunswick</u> resident <b>October 31<sup>st</sup></b> if you are a <u>Franklin Park</u> resident <b>October 31<sup>st</sup></b> if you are a <u>Somerset</u> resident <b>October 31<sup>st</sup></b> if you are a <u>South Brunswick</u> resident
REGISTRATION FEE	A one-time-only fee of \$75.00 will be required at time of registration.
PAY-IN-FULL DISCOUNT	If you pay in-full for the entire school year (September 2014 through June 2015) at the time of registration, you will receive a 5% discount.
TOILET TRAINING POLICY	The JCC of North and South Brunswick does not require your child to be toilet trained to join our program. Diapers or wet clothing will be changed when necessary. The use of pull-ups is permitted. Our school will accommodate your child's needs while in the process of being toilet trained.

Date submitted: \_\_\_\_\_

Registration Fee Received: Yes \_\_\_ / No \_\_\_

June 2015 Tuition Received: Yes \_\_\_ / No \_\_\_

Check #: \_\_\_\_\_

Cash Received: \_\_\_\_\_

Received By: \_\_\_\_\_





**Before And/Or After Care Registration Form  
The JCC of North & South Brunswick Nursery School  
2014-2015**

Please fill out all the information below and return as soon as possible.

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

Child's Class and Days Attending School \_\_\_\_\_

Parent's Name \_\_\_\_\_

Mother

Father

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

Work  
Phone \_\_\_\_\_

Mother

Father

Cell Phone \_\_\_\_\_

Mother

Father

Email (Mom) \_\_\_\_\_ (Dad) \_\_\_\_\_

Emergency Contact during times of Before and/or After Care other than parent:

\_\_\_\_\_

I want the following times for my child:

**BEFORE CARE – Beginning 7:30 AM – 9:00 AM**

Please indicate drop off time: \_\_\_\_\_

Please indicate days of the week: \_\_\_\_\_

**AFTER CARE – Beginning at 3:15 PM – 6:30 PM**

Please indicate pick up time: \_\_\_\_\_

Please indicate days of the week: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

## REGISTRATION TERMS & CONDITIONS

1. Payment for June 2015 tuition is due at the time of registration along with the \$75 registration fee.  
We require the \$75 registration fee and payment for June 2015 for everyone. To be considered up to date, half day students, (9:00-12:00AM), will pay the corresponding fees. Full day students, (9:00-3:15PM), will also pay the corresponding fees.  
You will be billed for September 2014 tuition at the end of August. Payment will be due by September 15<sup>th</sup>.
2. Submission of the completed application and fees is not a guarantee of acceptance.  
Excess applications will be filed in order received and applicants placed on a waiting list. All monies will be refunded if class space is not available. However, if accepted, the registration fee and June's tuition will not be refunded if the parent withdraws his/her child without Director's prior approval and 30 days written advance notice.  
If a child is withdrawn within the 30 day period, a refund will be given only if we are able to replace that vacated spot with another child.
5. If a second child is enrolled in the same family, a \$15 sibling monthly discount will apply.
4. Registration for all nursery school programs is considered a commitment for the entire year.  
Dropping of lunch and / or enrichments will be permitted only with thirty (30) days notice.
5. Tuition is calculated based on a 10 month (September-June) school year for both the morning and enrichment parts of the program. The yearly tuition for all programs is broken down into ten (10) manageable payments for your convenience.  
The school schedule reflects days off for major Jewish and Secular holidays, school closings, etc. If the tuition for the entire school year is paid at the time of registration, a 5% discount will apply.
6. A \$10 late fee will be imposed for payments received after the 15<sup>th</sup> of any month.
7. A child who stays for lunch and is not enrolled in the Optional Hot Lunch program, will need to bring a **DAIRY** or **VEGETARIAN** lunch only. After lunch, the children will have the opportunity to socialize as well as listen to stories, play games and participate in indoor and outdoor activities (weather permitting).  
Snacks are served during Enrichment class.
8. Please do not send a child who is sick to nursery school and/or the early stay or late stay programs.
9. No credit will be given for inclement weather. In cases of delayed openings in North Brunswick public schools, Early Stay will begin at 8:30 a.m, We do not have delayed openings. In cases of early dismissal in North Brunswick Public Schools, there will be no Late Stay. Designated New Jersey "state of emergency" days will not be credited, refunded or made up.
10. No credit will be given for the first three weeks of continuous absence due to illness. Credit will then be given beginning with the fourth week only with a note from your physician. Those students on vacation up to 4 weeks will be charged full tuition (100%). As a courtesy, you will be charged 60% tuition beginning with the 5<sup>th</sup> week.

Please return the completed application and required fees to the Nursery School office.  
Please make all checks payable to the JCC of North and South Brunswick Nursery School.  
Returned checks will incur a \$25 fee.

I have read and agree to the terms in this application.

Parent signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Date:

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

## DAILY ROUTINES

### **SLEEPING**

Please describe your child's usual bedtime routine (including what *time* and *where* he/she usually sleeps). \_\_\_\_\_

How do you know that your child is sleepy/tired? \_\_\_\_\_

Does your child have any difficulties falling asleep? \_\_\_\_\_ If yes, what is helpful? \_\_\_\_\_

About how many hours of uninterrupted sleep does your child get each night? \_\_\_\_\_

How many times per day does your child nap? \_\_\_\_\_ How many hours on average? \_\_\_\_\_

Does your child sleep with a special blanket, toy, pacifier, song? \_\_\_\_\_

Do you have any concerns about your child's sleep habits? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

### **EATING**

Does your child generally enjoy eating? \_\_\_\_\_ Do you consider your child a good eater? \_\_\_\_\_

What are some of your child's favorite foods (temperatures, textures, etc.)? \_\_\_\_\_

Is your child on any special diet? \_\_\_\_\_

If your child has any food allergies, please list here: \_\_\_\_\_

① If child has food allergies, ensure a Feeding and Nutrition Care Plan is established and on file.

Are there any other foods you do not want us to offer your child? \_\_\_\_\_

Are there foods from your home/culture that you would like us to offer? \_\_\_\_\_

Do you breastfeed your child?  Yes  No If yes, how often? \_\_\_\_\_

What does your child eat with?  hands  spoon  fork Does your child eat independently?  Yes  No

What does your child use to drink?  bottle (type of nipple: \_\_\_\_\_)  tippy cup  regular cup

Do you have any concerns or questions about your child's eating habits? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

### **TOILETING**

Does your child wear diapers? \_\_\_\_\_ If yes, what kind?  disposable  cloth  Pull-ups For naps? \_\_\_\_\_

If no, does your child use the toilet regularly? \_\_\_\_\_ Please explain: \_\_\_\_\_

Families use a variety of words to describe bathroom activities. Indicate the words your family uses for:

urine \_\_\_\_\_ bowel movement \_\_\_\_\_ genital area \_\_\_\_\_

Do you have any questions or concerns about your child's toileting habits? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

### **PLAY**

Does your child have a favorite toy/object or song? \_\_\_\_\_

Does your child enjoy playing with others? \_\_\_\_\_ Does your child enjoy playing alone? \_\_\_\_\_

What activities and/or toys does your child enjoy? \_\_\_\_\_

HEALTH

Does your child have any health problems? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Is your child taking any medication(s) regularly? \_\_\_\_\_ If yes, please list: \_\_\_\_\_

① If medications are to be given while in care, ensure a Medication Administration Form is utilized and on file for your child.

Does your child have a chronic health condition or specific health needs? (please be specific) \_\_\_\_\_

① If yes, ensure a Special Health Care Plan is established and on file for your child.

Does your child have frequent ear infections? \_\_\_\_\_ diarrhea? \_\_\_\_\_

Do you have any concerns about your child's health? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Children in group care may become ill with colds, viruses, etc. several times per year. At times, we are required to ask parents to keep their children out of child care until treatment begins or there are no symptoms. Please see our *Exclusion policy*.

GENERAL DEVELOPMENT

Do you have any concerns about your child's:

- hearing and/or vision? \_\_\_\_\_
- speech and language development? \_\_\_\_\_
- ability to move? \_\_\_\_\_
- overall development? \_\_\_\_\_

What languages are spoken at home? \_\_\_\_\_

What is your family's cultural identification (values, traditions)? \_\_\_\_\_

SOCIAL AND EMOTIONAL DEVELOPMENT

Has your child ever been in group care?  Yes  No If yes, how many different settings? \_\_\_\_\_

How does your child respond in group situations? \_\_\_\_\_

What can we do to help your child adjust to child care? \_\_\_\_\_

How would you describe your child's temperament? \_\_\_\_\_

How does your child communicate his/her needs? \_\_\_\_\_

How do you comfort your child? \_\_\_\_\_

Does your child use a special comforting item (such as a blanket, stuffed animal, doll)? \_\_\_\_\_

Does your child fear certain things? \_\_\_\_\_

How is your child disciplined? \_\_\_\_\_

What works best when you discipline your child? \_\_\_\_\_

Do you have any concerns about your child's social-emotional development or behavior? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

What educational/developmental experiences would you like us to emphasize with your child (for example, language development, social relationships, kindergarten readiness skills, physical or self-help skills, etc.)? \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_