



2011-2012  
INITIAL APPLICATION  
ENRICHMENTS ONLY

594 North Bridge Street P.O. Box  
6007 Bridgewater, N.J. 08807  
Phone: 908-722-0101  
Fax: 908-253-0878  
Email: [info@preschoolplace.com](mailto:info@preschoolplace.com)  
Web: [www.preschoolplace.com](http://www.preschoolplace.com)

Part I

CHILD'S NAME: \_\_\_\_\_  
First Middle Last Nickname, if applicable

DATE OF BIRTH: \_\_\_\_\_ AGE AS OF SEPTEMBER 2010 \_\_\_\_\_  
Years Months

HOME ADDRESS: \_\_\_\_\_ HOME PHONE #: \_\_\_\_\_  
SEX: M F

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ HOME ADDRESS: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ HOME PHONE #: \_\_\_\_\_

CELL # \_\_\_\_\_ CELL# \_\_\_\_\_

FATHER'S OCCUPATION: \_\_\_\_\_ MOTHER'S OCCUPATION: \_\_\_\_\_

PLACE OF BUSINESS: \_\_\_\_\_ PLACE OF BUSINESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE #: \_\_\_\_\_ BUSINESS PHONE #: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

Members of Temple Sholom? \_\_\_\_\_ As of: \_\_\_\_\_

Please check one:

- \_\_\_\_\_ Currently enrolled in The Preschool Place
- \_\_\_\_\_ New Applicant
- \_\_\_\_\_ Alumni Family of The Preschool Place

Alumnus' Name \_\_\_\_\_ Year(s) attended \_\_\_\_\_

Please check if your child has attended the programs below at The Preschool Place:

Someone Special and Me \_\_\_\_\_ 2 Year Old \_\_\_\_\_ 3 Year Old \_\_\_\_\_

Other schools your child has attended: \_\_\_\_\_

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

How did you learn of our school? (If a specific person, please enter name and address of that person)

\_\_\_\_\_ The district where you expect your child to attend elementary school:

Name of school: \_\_\_\_\_

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

**ENRICHMENT SELECTION:**

**Monday:** \_\_\_\_\_ What's Cooking (3s and 4s)

\_\_\_\_\_ Our Planet Earth (3s and 4s)

**Tuesday:** \_\_\_\_\_ Mini Maestros (3s and 4s)

\_\_\_\_\_ Little Bytes (4s only)

**Wednesday:** \_\_\_\_\_ Discover-Ease (3s and 4s)

\_\_\_\_\_ Mazel Tots (2s only 11:30-12:30)

**Thursday:** \_\_\_\_\_ Hand in Hand (3s and 4s)

\_\_\_\_\_ Story Stretchers (3s and 4s)

**Friday:** \_\_\_\_\_ Art Unlimited (3s and 4s)

\_\_\_\_\_ Heritage Street (3s and 4s)

**EXTENDED DAY/** Hours from 2:30-6:00 Monday through Thursday. Friday until 4:00 only  
(Please check days needed)

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday (until 4:00 only) \_\_\_\_\_

\_\_\_\_\_  
Date

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

Please return this form and a \$75.00 registration fee (check made payable to The Preschool Place and Kindergarten at Temple Shalom.)

If you are a current EZ-EFT customer and would like your financial institution to make this payment, please check here \_\_\_\_\_.

