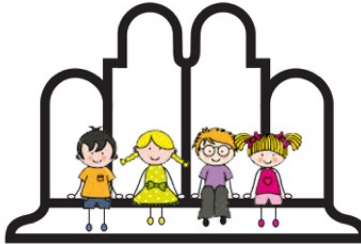


# Summer Camp

at



Beth Israel Nursery School

## 2017 Registration Form

Parent's Name(s): \_\_\_\_\_

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

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

E-mail \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

### Please check below:

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_

5 days: \_\_\_\_\_ 3 days: \_\_\_\_\_ 2 days: \_\_\_\_\_

Other: \_\_\_\_\_

### Hours

9 am – 12 noon: \_\_\_\_\_ 9 am – 3:30 pm: \_\_\_\_\_

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

Please return to Beth Israel Nursery School with \$100.00 registration fee.  
Registration fee applies to tuition for camp. Tuition must be paid in full by June 15, 2017.

Registration forms should be returned to:

Beth Israel Nursery School

Cookie Feldman

2501 Shore Road

Northfield, NJ 08225

[cookie.feldman@cbinorthfield.org](mailto:cookie.feldman@cbinorthfield.org)