

# Program and Tuition

2020 - 2021

## Tuition Fees

Registration Fee

\$250 (non-refundable)

### Monthly Fees

10% discount for second child.

☐ **Preschool (Casa) Program**

☐ **Toddler Program**

#### Full Day Program

**8:30 am – 3:30 pm**

- |   |        |
|---|--------|
| <input type="checkbox"/> Montessori 5 Full Days | \$1125 |
| <input type="checkbox"/> Montessori 4 Full Days | \$1000 |
| <input type="checkbox"/> Montessori 3 Full Days | \$875  |

#### Half Day Program

**8:30 am – 11:30 am**

- |   |       |
|---|-------|
| <input type="checkbox"/> Montessori 5 Half Days | \$725 |
| <input type="checkbox"/> Montessori 4 Half Days | \$675 |
| <input type="checkbox"/> Montessori 3 Half Days | \$600 |
| <input type="checkbox"/> Montessori 2 Half Days | \$525 |

#### After School Care

- |              |   |       |
|--------------|---|-------|
| 5 Afternoons | <input type="checkbox"/> <b>3:30 pm – 5:30 pm</b> | \$360 |
|              | <input type="checkbox"/> <b>3:30 pm – 5:00 pm</b> | \$300 |
|              | <input type="checkbox"/> <b>3:30 pm – 4:30 pm</b> | \$200 |
|              | <input type="checkbox"/> <b>3:30 pm – 4:00 pm</b> | \$100 |

#### Early Drop Off

- |            |   |       |
|------------|---|-------|
| 5 Mornings | <input type="checkbox"/> <b>8:00 am</b> | \$100 |
|------------|---|-------|

The \$250 Registration Fee (not required for current students) plus one month's tuition cheque should be dated for today. Please include 9 additional postdated cheques from August 15, 2020 – April 15, 2021. Make all cheques payable to: Jewish Youth Library of Ottawa

**Amount Enclosed:**

All Full Day Program Fees include a kosher organic lunch and two snacks.  
All Half Day Program Fees include a daily nutritious snack.

## Daily Schedule

(subject to change with notice)

### Morning

- |                      |  |
|----------------------|--|
| <b>8:30</b>          | Drop-off Time                              |
|                      | Tefilah, Parsha, Jewish Holidays, Alef Bet |
| <b>8:30 – 9:00</b>   |  |
| <b>9:00 – 11:30</b>  | Montessori Class                           |
| <b>10:00 – 10:15</b> | Snack Time                                 |
| <b>11:30 – 12:00</b> | Outside Play                               |

### Afternoon

- |                      |                  |
|----------------------|------------------|
| <b>12:00 – 12:30</b> | Lunch Time       |
| <b>12:30 – 1:15</b>  | Nap/Rest Time    |
| <b>1:15 – 2:45</b>   | Montessori Class |
| <b>2:45 – 3:00</b>   | Snack            |
| <b>3:00 – 3:30</b>   | Outside Play     |
| <b>3:30</b>          | Pickup           |



# Application Form

2020 - 2021

Child's Family Name: \_\_\_\_\_

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

City \_\_\_\_\_ Postal Code \_\_\_\_\_

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

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

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

Date of Birth: \_\_\_\_\_  
(M/D/Y)

Jewish Date of Birth: \_\_\_\_\_

## Doctor's Information

Child's OHIP #: \_\_\_\_\_

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

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

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

## Allergies / Medications:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

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

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

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

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

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

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

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

Names of people your child can be released to and their relation to the child:

\_\_\_\_\_

\_\_\_\_\_

## Emergency Contact

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

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_



***“Free the child's potential and you will transform him into the world.”***  
**Maria Montessori (1870-1952)**

What are your expectations for your child?

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Are you familiar with the philosophy of Maria Montessori? YES / NO

If yes, how? \_\_\_\_\_

Has your child had previous Montessori experience? YES / NO

If yes, please list the name of the school, location and dates attended: \_\_\_\_\_

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Other than Montessori, what prior school experience has your child had? (Please list the school, location and dates attended):

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Have there been any special occurrences in the life of the child? (several moves, accidents, hospitalization, separation from parents, etc.): \_\_\_\_\_

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Is there any other information you can tell us about your child's likes and dislikes, etc.:

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We sometimes take small walking trips to Hampton Park and around the neighbourhood.

I give permission for my child to attend these trips throughout the school year (Sept 2019 – June 2020).

☐ Yes

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date

I have read the enclosed Mission Statement in the Parent Handbook:

☐ Yes

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date



# Volunteer Job List

## 2020 - 2021



**Please check one (or more) jobs:**

Please choose one job. This is mandatory for all parents.

Thank You Very Much.

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- ☐ RAFFLE CHAIR
- ☐ HELP GET PRIZES FOR RAFFLE
- ☐ GET VOLUNTEERS FOR BUILDING A SUKKAH
- ☐ CHANUKAH PARTY
- ☐ GIFTS FOR TEACHERS (Chanukah and End of Year)
- ☐ END OF YEAR BARBEQUE
- ☐ FEBRUARY FRIDAY NIGHT SHABBAT DINNER
- ☐ TEL-A-THON FOR RAFFLE
- ☐ OTHER \_\_\_\_\_



I agree to do these jobs for the 2020 – 2021 school years.

*“Education cannot be effective unless it helps a child  
open up himself to life.”*

*-Maria Montessori*



# WE LOVE GRANDPARENTS!

Our School likes to maintain regular communication with each student's Grandparents, both near and far, so they are informed and involved in your child's preschool experience.

Please return the completed form along with the registration form.

If there are any additional Grandparents, please include them as well.

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

## Maternal Grandparents:

\_\_\_\_\_  
\_\_\_\_\_

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

City Prov. Postal Code

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

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

## Paternal Grandparents:

\_\_\_\_\_  
\_\_\_\_\_

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

City Prov. Postal Code

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

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





Please return the completed forms with:

1. \$250 registration fee (dated today)
2. One month's tuition fee (dated today)
3. 9 additional postdated cheques  
(There will be 10 tuition cheques in total)

Please make all cheques payable to:  
Jewish Youth Library

Thank You Very Much!

**Westboro Jewish Montessori Preschool**  
**Jewish Youth Library of Ottawa**

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Ottawa, ON  
K1Z 7H9

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