

TBY HIGH HOLY DAY YOUNG CHILDCARE RESERVATION FORM 2019

Temple Bat Yahm is happy to provide childcare for children ages 2 (and potty trained) to those in Kindergarten during Rosh Hashanah and Yom Kippur Main Day Services. Note the following times and session #s for your registration & payment.

Sessions	Holiday	Date/Time
Session 1	Rosh Hashanah Morning Service	Monday, September 30, 10:45 am Service
Session 2	Yom Kippur Morning Service	Wednesday, October 9, 10:45 am Service

Cost: FREE - Registration is REQUIRED! We will not be taking walk up registration!

Suggested donation of \$20

Nutrition: Apples and Crackers will be available for each child. **If needed, please pack a lunch for your child.**

NO PEANUT BUTTER OR TREE NUTS ARE PERMITTED IN THE TBY PRESCHOOL.

Reservations:

- To reserve a space for your children, please complete and return the form (with a check or credit card for the full amount).
- There are limited spaces available for each session and reservations will be on a first-come, first-serve basis.
- Only returned forms can assure a reservation (no money will be collected at the Temple during the HHD).
- Children from birth - 5th grade are enthusiastically invited to join us at the Children Service 9:00 am on Rosh Hashanah and Yom Kippur. **NO CHILDCARE WILL BE PROVIDED DURING THE CHILDREN SERVICE.**
- No childcare will be provided for children younger than 2 (or not potty trained). For children grades 1st - 4th, please use the YOUTH CHILDCARE form.
- Please admit your child to their session at least 15 minutes before each service.
- For your child's protection, parents are required to register their children at the Childcare desk upon your arrival in the morning

The deadline for Registration is Thursday, September 24, 2019 - NO WALK UP REGISTRATION

Parents Names: _____

Telephone: _____

Emergency Contact and Phone: _____

Email Address: _____

Complete Mailing Address: _____

Child's Name: _____ Birthdate: _____ Circle Sessions Required: 1 2

Child's Name: _____ Birthdate: _____ Circle Sessions Required: 1 2

Child's Name: _____ Birthdate: _____ Circle Sessions Required: 1 2

Total Amount Enclosed: \$ _____

Mail this form (with your check payable) to Temple Bat Yahm 1011 Camelback Street, Newport Beach, CA 92660. Write "HHD Young Childcare" on the envelope. Contact Temple Office with questions: 949.644.1999

Visa/MC/Amex #: _____ Sec Code: _____ Exp. Date: _____

Signature: _____ Zip: _____

Office Use Only: Initials: _____ \$RCVD: _____ Date RCVD: _____ Chk#: _____

V/MC/AMEX#: _____