



# TEMPLE BETH OR Preschool

## Registration Form 2026-2027

Date \_\_\_\_\_

Temple Member? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If no, are you interested in membership? \_\_\_\_\_ Yes \_\_\_\_\_ No

Child's Name

First

Last

Nickname

Child's Date of Birth

Address

Street

City

Zip

Parent/Guardian \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

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

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

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

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

By signing below, you agree to the following:

- In the interest of helping our school determine how best to serve your child, you are **required**, in writing, to inform us at the time of registration of any known circumstances which may affect your child's ability to participate in our preschool. These circumstances would include serious behavioral issues or any psychological, medical, physical, or developmental conditions. All information provided will remain confidential per our confidentiality policy. Please attach a separate sheet to provide this information as necessary.
- You may only receive the member discount if you are a TBO member in good standing as of August 2026. If at any time you resign your membership, you will no longer receive the tuition discount starting from the date of resignation.

Please sign below to acknowledge and accept these requirements of admission.

Parent/Guardian Signature

Date

## TBOP school year 2026-2027

Class age:	Days of the week	Hours	Must be ___ years old by August 31, 2026
Ones	<input type="checkbox"/> T/TH <input type="checkbox"/> M/W/F <input type="checkbox"/> M-F	9 am – 1 pm	One
Twos	<input type="checkbox"/> T/TH <input type="checkbox"/> M/W/F <input type="checkbox"/> M-F	9 am – 1 pm	Two
Threes	<input type="checkbox"/> M/W/F <input type="checkbox"/> M-F	9 am – 1 pm	Three
Fours	<input type="checkbox"/> M-F	9 am – 1 pm	Four

Class age:	Days of the week	Hours	Must be ___ years old by August 31, 2026.
Transitional K	<input type="checkbox"/> M-F	8:30 am – 3:00 pm	Five

**When returning registration materials, please make sure to include:**

- This form
- Registration fee
- Any information we need that will help us to determine how best to serve your child.

**Mail, email, or bring in to:**  
**Temple Beth Or Preschool**  
**5315 Creedmoor Road Raleigh NC**  
**27612**

**Questions? Contact Shannon at  
 919-418-3043 or email Sherri and  
 Shannon at [tbop@tbopreschool.org](mailto:tbop@tbopreschool.org)**



# TEMPLE BETH OR Preschool

## 2026-2027 Tuition and Fees

**Annual Registration Fee: \$300 for TBO Members  
(non-refundable) \$75 for siblings**

**\$325 for non-members**

**Program Fee: Due in August, \$360 per child and \$250 for siblings**

Classroom(s)	Days Attending	Annual Tuition	10 Monthly Payments (August 2026 - May 2027)
Ones	5 day	\$11,800	\$1180
	3 day	\$8,900	\$890
	2 days	\$6,225	\$622.50
Twos	5 day	\$11,700	\$1170
	3 day	\$8,810	\$881
	2 days	\$6,150	\$615
Threes	5 day	\$9,900	\$990
	3 day	\$7,760	\$776
Pre-K	5 day	\$8,600	\$860

**Temple Beth Or Members will receive a 15% discount.**

We also offer a 10% sibling discount, to the sibling with the higher tuition,  
when more than one child is enrolled.

### Extended Care Options

#### Boker Tov (8am-9am)

Days Attending per Week	1	2	3	4	5
Monthly Tuition	\$62	\$117	\$173	\$224	\$282

#### Extended Day (1pm-4pm)

##### 2 year olds

Days Attending per Week	1	2	3	4	5
Monthly Tuition	\$172	\$319	\$460	\$580	\$674

##### 3-5 year olds

Days Attending per Week	1	2	3	4	5
Monthly Tuition	\$140	\$255	\$350	\$433	\$535