



**CAI Esther B. Feldman Preschool Registration Form
School Year 2026-2027**

*For more information, please contact Allison Wetzel at 520-745-5550, ext. 229 or ECDirector@caiaz.org
\$125 (Member) or \$150 (Non-Member) non-refundable Registration Fee must accompany this form - see payment options below.*

- Child's Name Hebrew Name
 Date of Birth Age Male Female
 Address
 City State Zip Home Phone
- Parent/Guardian (1) Name Hebrew Name
 Employer DOB
 Work Phone Cell Phone
 Parent/Guardian (1) Religion E-Mail
- Parent/Guardian (2) Name Hebrew Name
 Employer DOB
 Work Phone Cell Phone
 Parent/Guardian (2) Religion E-Mail
- How did you hear about our school?
 Siblings (names and dates of birth)
 Member(s) of Congregation Anshei Israel? Yes No
- If you are affiliated with another synagogue, which one?

Please indicate child's age group:

(12 months, 2's and 3's must attend at least 3 half days. Pre-K must attend at least 5 half days).

	12 Months	2's	3's	Pre-K
Number of days attending	Three (M, W & F Only)			
	Five			
Child Attending	9:00am - 12:30pm		Half Day	
	9:00am - 3:30pm		Full Day	

Financial Assistance is requested (**Scholarship available to CAI Members only**) Yes

\$125 (Member) or \$150 (Non-Member) non-refundable Registration Fee payment options (choose only one)

Cash	Check Number	Bank Draft: Routing Number
		Account Number
Visa/MC/Discover #	Exp. Date	Sec. Code

Signature

All tuition, extended care and synagogue membership charges (if applicable) must be current.

ENROLLMENT FORM FOR CHILD WITH SPECIAL NEEDS

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***If child has an Individualized Education Plan (IEP), or 504 plan, please provide a copy and give updated documentation as applicable.**

Child's Name

Parent/Guardian Name(s)

Name of Physician or Therapist

Address

Phone

Diagnosis of child's condition

Brief explanation of how the condition affects the child's care and/or education.

Special instructions

Who should be involved in planning and evaluation for this child?

How often should a follow-up evaluation of progress be done?

(Form completed by/Position/Date)