



54 Nagle Avenue (between Broadway/195th Street)  
New York NY 10040 212-569-6200  
www.ywashhts.org



# Preschool Prep

For children 2.3 to 3 years (as of Sept., 2010)

Class Size: 10-12 children

Dates: Tuesdays and Thursdays 9:00-11:25 from Sept. 14, 2010-June 2, 2011

Or NEW!- Mondays and Wednesdays 11:00-1:25 from Sept,13, 2010 -June 1, 2011

(school closings on Department of Ed/Jewish holidays- calendar to follow)

**Annual fees:**

**Program fee: \$3250/year**

**Membership: \$200 for one child or \$225 for two or more children**

**Payments: \$250 plus membership fee to register.**

**\$750 payments due each of the following dates:**

**July 1, 2010, Sept 1, 2010, Nov 1, 2010,**

**Jan 1, 2011**



**Twice a week preschool program for twos and**

**younger threes-interactive play in learning centers, circle time, large motor activities, storytime, art, movement and snack. Specialists teach music and dance.**

**Supervised by head and assistant teachers.**

**For more information, contact Susan at 212-569-6200 ext 224 or at [sherman@ywashhts.org](mailto:sherman@ywashhts.org)**

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**PRESCHOOL PREP REGISTRATION FORM 10-11(Please complete and return with payment)**

**Class choice: Tues-Thurs \_\_\_\_\_ Mon-Wed \_\_\_\_\_**

**Child's name \_\_\_\_\_ Parent's name \_\_\_\_\_**

**Address, City, Zip \_\_\_\_\_**

**Phone #: \_\_\_\_\_ Child's Birth Date \_\_\_\_\_**

**Email Address \_\_\_\_\_**

**Fee Enclosed \_\_\_\_\_(checks payable to YM & YWHA of Washington Heights & Inwood)**

**Or if paying by credit card...**

**Please charge \$250 plus my family membership of \$200 for one child in program or \$225 for two children in program to my credit card: Card Member Signature \_\_\_\_\_**

**Date \_\_\_\_\_**

**Also, please charge my credit card for my remaining four payments of \$750 each on the following dates: July 1, 2010; Sept 1, 2010; Nov 1, 2010; Jan 1, 2011:**

**Card Member Signature \_\_\_\_\_ Date \_\_\_\_\_**

**As a family member, I would also like to join the Y's Fitness Center. Please charge my credit card an additional \$125 for an individual membership \_\_\_\_\_ or \$175 for a couple membership \_\_\_\_\_:**

**Card Member Signature \_\_\_\_\_ Date \_\_\_\_\_**

**\*Please Circle Your Credit Card Company: VISA Mastercard**

**Card Member Number \_\_\_\_\_ Exp. Date \_\_\_\_\_**