



ONE EAST SIXTY-FIFTH STREET
NEW YORK, NEW YORK 10065
(212) 507-9531

www.emanuelnyc.org/nursery

APPLICATION

NAME OF CHILD _____ NAME USUALLY CALLED _____
M ___ or F ___ DATE OF BIRTH _____
SCHOOL(S) PRESENTLY ATTENDING _____

APPLICANT'S PARENT

APPLICANT'S PARENT

| | | | |
|---------------------------------|---------------------|---------------------------------|---------------------|
| First _____ | Last _____ | First _____ | Last _____ |
| RELATIONSHIP TO APPLICANT _____ | | RELATIONSHIP TO APPLICANT _____ | |
| EMAIL ADDRESS _____ | | EMAIL ADDRESS _____ | |
| HOME ADDRESS _____ | | HOME ADDRESS _____ | |
| APARTMENT # _____ ZIP _____ | | APARTMENT # _____ ZIP _____ | |
| HOME PHONE _____ | | HOME PHONE _____ | |
| CELL PHONE _____ | | CELL PHONE _____ | |
| EMPLOYER _____ | | EMPLOYER _____ | |
| NATURE OF BUSINESS _____ | | NATURE OF BUSINESS _____ | |
| BUSINESS TELEPHONE _____ | | BUSINESS TELEPHONE _____ | |
| POSITION IN FIRM _____ | | POSITION IN FIRM _____ | |
| COLLEGE(S) _____ | DEGREE & DATE _____ | COLLEGE(S) _____ | DEGREE & DATE _____ |
| _____ | | _____ | |
| _____ | | _____ | |

APPLICANT'S NATURAL PARENTS ARE:

- Married Separated Divorced Single Parent Father Deceased
 Mother Deceased Domestic Partners

APPLICANT LIVES WITH

IF A DUPLICATE MAILING IS NECESSARY FOR A SEPARATE HOUSEHOLD, PLEASE GIVE NAME AND ADDRESS:

WHAT LANGUAGE OTHER THAN ENGLISH IS REGULARLY SPOKEN AT HOME? _____

ARE YOU A MEMBER OF CONGREGATION EMANU-EL AT THIS TIME? _____ YEAR _____

THIS APPLICATION MUST BE ACCOMPANIED BY A \$75.00 NON-REFUNDABLE FEE PER CHILD IN U.S. DOLLARS, PAYABLE TO: CONGREGATION EMANU-EL

PLEASE INCLUDE ONE SMALL, RECENT PHOTO OF YOUR FAMILY WITH YOUR NAME PRINTED ON THE BACK.

TOURS ARE HELD AT 10:00 AM ON MONDAYS, TUESDAYS, AND THURSDAYS. THERE ARE NO TOURS ON WEDNESDAYS AND FRIDAYS. IF YOU CANNOT ATTEND ON A PARTICULAR DAY OF THE WEEK, PLEASE LET US KNOW AND WE WILL TRY TO ACCOMMODATE YOUR REQUEST.

Please check here if you will need financial aid _____

SIGNATURE _____ DATE _____

Please return this application and fee to the Nursery School by October 31.

THE SAMUEL J. AND ETHEL LEFRAK LEARNING CENTER