



Child's Name: _____ Sex: _____ Birth Date: ____/____/____
Child's Nickname: _____ Age as of September 2025: _____
Child's Hebrew Name (if applicable): _____

Parent/Guardian's Name: _____ Home Phone #: _____
Home Address: _____ Apt #: _____ Zip: _____
Cell Phone # _____ Email: _____
Occupation: _____ Employer's Name: _____
Employer's Address _____ Work Phone #: _____

Parent/Guardian's Name: _____ Home Phone #: _____
Home Address: _____ Apt #: _____ Zip: _____
Cell Phone #: _____ Email: _____
Occupation: _____ Employer's Name: _____
Employer's Address: _____ Work Phone #: _____

Siblings: Names, Ages, Schools: _____

Synagogue Affiliation (optional): _____

Previous Group Experience(s) & Dates Attended: _____

General Health Considerations (health problems, special needs, allergies): _____

Has your child been referred for Early Intervention, Speech Therapy, OT, PT? If so, do they have an IEP/other reports? Please share the most recent reports with us. _____

Does your child have any fears? If so, please describe. _____

If your child is applying to other schools, which ones? _____

Is there anything else we should know about your child? _____

How did you hear about Yaldaynu Preschool? _____

See reverse for class options 

Program Options 2025-2026

Pick one class option, # of days interested in attending, hours interested in attending.

Please note that full day and extended day programming is Monday-Thursday. Friday dismissal is 12:15pm (Blue Door)/ 12:30pm (Red & Yellow Doors).

A. Blue Door – Children turning 2 by August 31, 2025

Number of days: 3 days 5 days

Option 1: 8:45am – 12:15pm (half day)

Option 2: 8:45am – 2:30pm (full day)

Option 3: 8:45am – extended hours to be determined

B. Red Door – Children turning 3 by August 31, 2025

Children in this class attend school 5 days/week.

Option 1: 8:30am – 12:30pm (half day)

Option 2: 8:30am – 2:30pm (full day)

Option 3: 8:30am – extended hours to be determined

C. Yellow Door – 4's/5's – Pre-K

Children in this class attend school 5 days/week until 2:30pm.

Option 1: 8:45am – 2:30pm (full day)

Option 2: 8:45am – extended hours to be determined

Please submit with a \$100 application fee.

Payments can be made via Zelle (office@yaldaynu.org) or check payable to **Yaldaynu Center Inc.**

Checks should be mailed to: 251 W 100th Street, 3rd Floor, New York, NY 10025