

NORTH SHORE SYNAGOGUE NURSERY SCHOOL 83 Muttontown Eastwoods Rd., Syosset, NY 11791

Phone: 516-921-2282 x4 Fax: 516-921-2393

Director: Jacquie Sanchez

Dear Parents:

We are pleased to offer our After School programs.

MONDAY: Alphabet Adventures

Travel through the alphabet each week creating an alphabet craft while having many alphabet adventures through games and stories.

Dates: 1/23, 1/30, 2/6, 2/13, 2/27, 3/6, 3/13, 3/20, 3/27, 4/3, 4/7, 4/24, 5/1, 5/8, 5/15, 5/22, 6/5

TUESDAY: FAST Sports

The Fast program blends movement games and music with a multi-sport component. The program is designed to cultivate a positive fun environment through physical activities and sports. Dates: 1/17, 1/24, 1/31, 2/7, 2/14, 2/28, 3/7, 3/14, 3/21, 3/28, 4/4, 4/18, 4/25, 5/2, 5/9, 5/16, 5/23, 5/30, 6/6

WEDNESDAY: Full STEAM Ahead

Have fun exploring, inventing, building and figuring things out while using our Science, Technology, Engineering, Art and Mathematic skills.

Dates: 1/18, 1/25, 2/1, 2/8, 2/15, 3/1, 3/8, 3/15, 3/22, 3/29, 4/5, 4/19, 4/26, 5/3, 5/10, 5/17, 5/24, 5/31, 6/7

THURSDAY: Pee Wee Pros

This Active Sports Curriculum introduces children to the fundamentals of physical fitness, strengthening motor and object control skills. The multi-sport approach includes favorites such as soccer, basketball, football, baseball, hockey, lacrosse, tennis, golf, track & field & much more. Dates: 1/19, 1/26, 2/2, 2/9, 2/16, 3/2, 3/9, 3/16, 3/23, 4/20, 4/27, 5/4, 5/11, 5/18, 6/1, 6/8

FRIDAY: SHABBAT EXPERIENCE

Join the clergy and experience Shabbat through stories, songs, prayers, music, and dance. The children will also enjoy challah and a craft.

Dates: 1/20, 1/27, 2/3, 2/10, 2/17, 3/3, 3/10, 3/17, 3/24, 3/31, 4/28, 5/5, 5/12, 5/19, 6/2, 6/9

You can sign up for one or all programs. All programs have limited spaces, register early.

Enclosed you will find a registration form. Please return the form and payment by January11th. All checks should be made out to: North Shore Synagogue.

Thank you, Jacquie Sanchez Early Childhood Director

North Shore Synagogue After-School Registration Form



January 17th^h – June 9th

		(Class:	_	
List Allergies:		EF	PI Pen: Yes:	No:	
Parent Name:	(Include last name if di	fferent than child)			
Address:					
Home #:		Cell #:			
Business #:		E-mail:			
Emergency N	ame:	Rela	itionship:		
Phone #:					
Please list all	those authorized to pick up yo	our child:			
	Monday (Alphabet Adventures) Tuesday (Fast Track) Wednesday (Edible Art) Thursday (Pee Wee Pros) Friday (Shabbat Experience) Tuition Total: _	\$760 \$570 \$640			
	redits will be issued as follows:				
- Before to During to After the Payment must be refunds or credits	the start of class, a full refund/cre the first 2 weeks of classes, a pro e 2 nd class, no refunds/credit will made in full at time of registration. Plea due to absences. (Please note there is a	o-rated refund/credit w be issued se note, we cannot accom	vill be issued minu modate make up class	ses and there will be no	
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