

Please complete one form for each child

For Office Use Only:	
Rec'd	_____
Amt:	_____
Chk #	

## CONGREGATION B'NAI ISRAEL RELIGIOUS SCHOOL

### 5770/2009-2010 NEW STUDENT ENROLLMENT FORM

**Student Name:** \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Last, First, Middle)

Hebrew Name: \_\_\_\_\_ Student E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

'09-'10 Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Public or Private School: \_\_\_\_\_

**Parent Name:** \_\_\_\_\_ **Parent Name:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Pager #: \_\_\_\_\_ Pager #: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_ Parent E-mail: \_\_\_\_\_

Fax #: \_\_\_\_\_ Fax #: \_\_\_\_\_

*It is important for both parents to be involved in their child's Jewish education. In instances where parents no longer live together, we will send information regarding classes to both parents. Please complete the following if different from above:*

Home Address: \_\_\_\_\_ Home Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

<u>Names of Siblings</u>	<u>Birthdate</u>	<u>Grade '09-'10</u>	<u>Public/Private School</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- I am interested in serving on the Religious School Committee. **Please call me.**
- I am interested in being a Room Parent. **Please call me.**
- I would be interested in talking with Ira about being a substitute teacher.
- There has been a change in our family situation since last year.
- I do not wish my child's address & phone number to be distributed to schoolmates.
- I do not want photos of my child published on the Temple web site or in newspapers.

*(Note: students will not be identified individually in any photos.)*

Please attach or e-mail a recent photo

Over, please

# MEDICAL EMERGENCY PERMISSION STATEMENT

## Permission Agreement

I hereby grant permission for the B'nai Israel Education Center staff to take whatever steps may be necessary to obtain emergency medical care, if warranted for \_\_\_\_\_.  
(student's name)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Membership/Policy Number: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_  
(A local person other than a parent)

Relationship to student \_\_\_\_\_ Cell Phone \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Please list any and all allergies your child has, including allergies to food or medications:

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Please describe any special physical/learning needs that might affect the student's performance and/or participation:

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Please go to [www.congregationbnaisrael.org/jeap.pdf](http://www.congregationbnaisrael.org/jeap.pdf) and print out the Jewish Educational Action Plan form and send it in with your enrollment. This will help us meet the needs of your child.

Please describe any medication that the student takes regularly:

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Please describe any family arrangements that might affect the student's attendance:

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### Tuition for the 2009-2010 School Year

<u>Kitah (Grade)</u>	<u>Full Tuition</u>	<u>New Student Discount</u>
Gan - Kitah Gimel (K - 3 <sup>rd</sup> )	\$528.00	\$508.00
Kitot Daled - Vav (4 <sup>th</sup> - 6 <sup>th</sup> )	\$643.00	\$623.00
Kitot Zayin - Chet (7 <sup>th</sup> - 8 <sup>th</sup> )	\$528.00	\$508.00

**Note: There is a \$100.00 discount for the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> child enrolled in Gan – Kitah Chet this year.**

Please note that Temple policy requires that Religious School Tuition be paid in full prior to the first class session. In order to set up a payment plan at the time of registration, we require either post dated checks totaling the full amount of tuition or your credit card information – you will be charged as follows:  
1/3 Now, 1/3 November 25 and finally 1/3 January 27.

High School (9<sup>th</sup> -12<sup>th</sup>) registration materials will be sent in late August by Merkaz.  
Call 372-6567 x139 for more information,