



Sha'arei Shalom

HEBREW SCHOOL REGISTRATION FORM

5771-5772 (2011-2012) School Year

STUDENT INFORMATION

First Name Middle Name Last Name

Hebrew Name Birth Date Hebrew School Grade Completed / Date

Age (Sept 2011) Public School Grade (Sept 2011)

PARENT/GUARDIAN 1

PARENT/GUARDIAN 2

First and Last Name

First and Last Name

Address

Address

Home Phone Cell Phone

Home Phone Cell Phone

Email

Email

Class	Class Structure	Member Rate*	Non-Member Rate
Preschool Program	1x per month, 1 hr class	\$100	\$150
Gan Yaladeem: Kindergarten	1x per month, 2 hr class	\$250	\$450
Kitah Alef: First Grade	2x per month, 2 hr class	\$450	\$800
Kitah Bet: Second Grade	Every Sunday, 2 hr class	\$770	\$1250
Kitah Gimel: Third Grade	2x per week, Learners Service	\$930	\$1250
Kitah Dalet: Fourth Grade	2x per week, Learners Service	\$930	\$1250
Kitah Hey: Fifth Grade	2x per week, Learners Service	\$930	\$1250
Kitah Vav: Sixth Grade	2x per week, Learners Service	\$930	\$1250
Kitah Zion: Seventh Grade	1x per month, Learners Service	\$390	\$700

*Member Rates apply for members in good standing.

NOTES:

- Take 10% off lowest rate for additional children
- Rates do not include purchase of Hebrew School books. Cost of books ranges from \$20-60 per student.
- Separate Registration Forms are needed for each child.
- Be sure to fill out Emergency Medical Form on back.

TOTAL TUITION DUE: _____ DEPOSIT ENCLOSED: \$ _____

1. A \$100 per child, non-refundable deposit is due by June 15, 2011.
2. 50% of the total tuition is due by July 15, 2011.
3. Complete tuition payment is due by August 15, 2011.

Please mail the registration form and check to: Sha'arei Shalom, P.O. Box 454, Ashland, MA 01721.

If you have any questions please contact: Lisa Clay, tel 774-573-3319.

EMERGENCY AND MEDICAL CONTACT INFORMATION

Child's Physician Physicians Tel

Child's Allergies

Any Medical, Behavioral or Learning Issues you would like to tell us about

Emergency Contact if Parent is unavailable Relationship to Child

Tel Cell Additional Tel

CARPOOL RELEASE

My child has permission to be driven home from Hebrew School by the following people:

Name Relationship

Name Relationship

Name Relationship

Name Relationship

Name Relationship

MARKETING RELEASE

Photographs taken in our school or at our events may be used for promotional purposes. We will not identify your child's name or directory information with their photo.

Please check:

- My student's image (photograph or video) may be used in marketing or publicity
- My student's image (photograph or video) may not be used in marketing or publicity

Parent/Guardian Signature Date