## SSlogowithnotag_1

## HEBREW SCHOOL REGISTRATION FORM School Year: 2020-21

STUDENT INFORMATION

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name Middle Name Last Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hebrew Name Birth Date Hebrew School Grade Completed / Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age **(Sept 2020)** Public School Grade **(Sept 2020)**

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** |
| Pre-K/Kindergarten | 1x per month, 2 hr class | $250 | $450 |
| Kitah Alef: First Grade | Every Sunday, 2 hr class | $600 | $900 |
| Kitah Bet: Second Grade | Every Sunday, 2 hr class | $770 | $1250 |
| Kitah Gimel: Third Grade | 2x per week, Learners Service | $1030 | $1500 |
| Kitah Dalet: Fourth Grade | 2x per week, Learners Service | $1030 | N/A |
| Kitah Hey: Fifth Grade | 2x per week, Learners Service | $1030 | N/A |
| Kitah Vav: Sixth Grade | 2x per week, Learners Service | $1030 | N/A |
| Kitah Zion: Seventh Grade | 1x per month, Learners Service | $690 | N/A |

*\*Member Rates apply for members in good standing.*

NOTES:

* **For new students, receive $180 off Hebrew School Tuition if membership dues and tuition paid in full by first day of Hebrew School.**
* Take 10% off lowest rate for additional child
* 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.
* Please note that you will be expected to provide Challah and Juice 1-2 times per year for the Sunday morning snack. Cost is approximately $20.

**TOTAL TUITION DUE: \_\_\_\_\_\_\_\_\_ DEPOSIT ENCLOSED**: $\_\_\_\_\_\_\_\_\_

1. **A $100 per child, non-refundable deposit is due by June 1, 2020**
2. **50% of the total tuition is due by July 15, 2020.**
3. **Complete tuition payment is due by August 15, 2020**

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 us at*** [***school@shaareishalom.org***](mailto:school@shaareishalom.org)***.***

**EMERGENCY AND MEDICAL CONTACT INFORMATION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Physician Physicians Tel

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Child’s Allergies

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact if Parent is unavailable Relationship to Child

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Tel Cell Additional Tel

**CARPOOL RELEASE**

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Relationship

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Name Relationship

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Name Relationship

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Name Relationship

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Name Relationship

You may use my child’s photograph in marketing materials for the Hebrew school and community. Please check one:

\_\_\_\_\_Yes \_\_\_\_\_\_No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent/Guardian Signature Date