



Where Contemporary Jews Embrace Traditional Judaism

Religious School Registration Form 2010/2011 5771

PLEASE PRINT ALL INFORMATION

Parents'/Guardians' names _____

Address _____

City _____ ZIP _____

Home phone _____

Emergency contact information (Parent/Guardian):

Primary

Secondary

Cell phone: _____

Business phone _____

E-mail _____

Please notify the Synagogue office if any of the above information changes

CHILD 1

CHILD 2

CHILD 3

Full name _____

Hebrew name _____

Date of birth _____

Public school grade
as of August 2010 _____

STEP 1 CONSENT FOR EMERGENCY MEDICAL CARE

If my child is ill or injured at school and needs emergency care, and I cannot be contacted, I hereby authorize Congregation Beth Am ("CBA") to make whatever arrangements are necessary. I agree to assume all responsibility and expenses, including transportation, incurred at that time. Emergency care will be provided as directed by emergency personnel responding to CBA.

Please indicate any food allergies, medications or special conditions:

Signature of Parent/Guardian _____ Date: _____

STEP 2 PLEASE PROVIDE ADDITIONAL INFORMATION ABOUT YOUR CHILD

Please attach a confidential note to this form describing any special areas of which the school should be aware in order to best meet the needs of your child.

STEP 3 ACTIVITY RELEASE

I hereby give permission for my child to participate in all activities of the CBA Religious School. The undersigned, individually and as legal guardian, hereby releases CBA, its agents, representatives and employees from any acts or omissions that cause or result in injury to the registered child occurring at outings or going to and from outings, regardless of cause.

Signature of Parent/Guardian _____ Date: _____

PLEASE COMPLETE PAGE 2, WHICH IS PART OF THIS FORM

STEP 4 PUBLICITY RELEASE

I hereby give permission for my child to be involved in publicity for CBA and/or its Religious School in photos either displayed or printed in such venues as newspapers, television or the CBA website.

Signature of Parent/Guardian _____ Date: _____

STEP 5 PLEASE CHOOSE THE PROGRAM(S) FOR WHICH YOU ARE REGISTERING YOUR CHILD(REN)

<u>Grade Level*</u>	<u>Day(s)</u>	<u>Location(s)</u>	<u>No. of Children</u>	<u>Tuition**</u>	<u>Non-member</u>	<u>Total</u>
Pre-K (Age 4)	Sunday	Longwood	_____	\$150	\$300	\$_____
K through Grade 2	Sunday	Longwood	_____	\$325	\$525	\$_____
Grades 3-5	Tues./Sun.	Winter Spgs./Longwood	_____	\$425	\$625	\$_____
Grades 3-5	Wed./Sun.	Longwood	_____	\$425	\$625	\$_____
Grades 6-7	Tues./Shabbat	Winter Spgs./Longwood	_____	\$425	\$625	\$_____
Grades 6-7	Wed./Shabbat	Longwood	_____	\$425	\$625	\$_____
						Sub-total \$_____
						Sibling discount \$_____
						Grand Total \$_____

* As of August 2010
 ** Rates in this column are available only to members in good standing

NOTES:

1. There is NO ADDITIONAL CHARGE for books and materials
2. If more than one child is enrolled, there is a tuition discount of \$50/child for the younger sibling(s). **This discount is not available to siblings enrolled in the Pre-K class or with the non-member rate.**

STEP 6 PAYMENT

**At least 1/2 the tuition is due at the time of registration in Religious School.
 The remainder is due by December 31, 2010.**

Children may not attend class until payments have been received when due and this Registration Form has been received by the CBA office.

In cases of special need,
 alternative payment arrangements may be made with the CBA Treasurer.

Initial payment made:

Cash \$_____ Check no. _____ \$_____

Credit Card* \$_____

Credit Card no. _____

Expiration date ____ / ____

Signature _____

*Credit Card payments can be made through the secure Payments page on our website (www.CongBethAm.org)