



# Hebrew School Registration Form

5776/2015-16

Student(s) Last Name \_\_\_\_\_

## Part One: Parent Information

Parent 1	Parent 2
Name:	Name:
Email:	Email:
Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other	Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other
Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other	Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other
Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other	Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other
Address <input type="checkbox"/> Children's Primary Address	Address <input type="checkbox"/> Children's Primary Address <input type="checkbox"/> Same as Parent 1

## Emergency Contacts

In the event of an emergency, every effort will be made to contact the parents. Please provide additional emergency contacts if a parent is unreachable.

In case of emergency, do you give your permission to the Director of Education, Rabbi, Teacher or other appropriate person to call your doctor/dentist and/or take your child to the hospital to receive necessary emergency treatment?  Yes  No

**Parent's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

Name:	Name:
Email:	Email:
Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other	Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other
Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other	Phone: <input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Other

## Family Doctors/Dentist

Primary Doctor:	Primary Dentist
Phone:	Phone:
May we contact your child's doctor/dentist if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	



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## Part Two: Student Information

Student 1		Student 2	
Name:		Name:	
Hebrew Name:		Hebrew Name:	
Birthdate:		Birthdate:	
Secular School:		Secular School:	
Secular Grade:		Secular Grade:	
Hebrew School Grade:		Hebrew School Grade:	
Student 3		Student 4	
Name:		Name:	
Hebrew Name:		Hebrew Name:	
Birthdate:		Birthdate:	
Secular School:		Secular School:	
Secular Grade:		Secular Grade:	
Hebrew School Grade:		Hebrew School Grade:	

## Medical Information

Student 1		Student 2	
Allergies: <input type="checkbox"/> None		Allergies: <input type="checkbox"/> None	
Medical Conditions: <input type="checkbox"/> None		Medical Conditions: <input type="checkbox"/> None	
Medications: <input type="checkbox"/> None		Medications: <input type="checkbox"/> None	
Student 3		Student 4	
Allergies: <input type="checkbox"/> None		Allergies: <input type="checkbox"/> None	
Medical Conditions: <input type="checkbox"/> None		Medical Conditions: <input type="checkbox"/> None	
Medications: <input type="checkbox"/> None		Medications: <input type="checkbox"/> None	



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## Learning Profile

### Student 1

Name:

Does your child have any special learning needs?

Yes  No

If yes, please explain:

Does your child have an IEP?

Yes  No

If yes, are you willing to share it with us?

Yes  No

Does your child receive any special services for secular school, such as special education classes, resource room pullout program, or other services?  Yes  No

If yes, please explain:

Is there anything else you would like us to know about your child (subjects that he/she particularly likes or dislikes, special interests or hobbies, areas of strength or weakness, significant changes in school or at home that your child has experienced in the past, etc.)? If yes, please explain:

### Student 2

Name:

Does your child have any special learning needs?

Yes  No

If yes, please explain:

Does your child have an IEP?

Yes  No

If yes, are you willing to share it with us?

Yes  No

Does your child receive any special services for secular school, such as special education classes, resource room pullout program, or other services?  Yes  No

If yes, please explain:

Is there anything else you would like us to know about your child (subjects that he/she particularly likes or dislikes, special interests or hobbies, areas of strength or weakness, significant changes in school or at home that your child has experienced in the past, etc.)? If yes, please explain:



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## Student 3

Name:

Does your child have any special learning needs?

Yes  No

If yes, please explain:

Does your child have an IEP?

Yes  No

If yes, are you willing to share it with us?

Yes  No

Does your child receive any special services for secular school, such as special education classes, resource room pullout program, or other services?  Yes  No

If yes, please explain:

Is there anything else you would like us to know about your child (subjects that he/she particularly likes or dislikes, special interests or hobbies, areas of strength or weakness, significant changes in school or at home that your child has experienced in the past, etc.)? If yes, please explain:

## Student 4

Name:

Does your child have any special learning needs?

Yes  No

If yes, please explain:

Does your child have an IEP?

Yes  No

If yes, are you willing to share it with us?

Yes  No

Does your child receive any special services for secular school, such as special education classes, resource room pullout program, or other services?  Yes  No

If yes, please explain:

Is there anything else you would like us to know about your child (subjects that he/she particularly likes or dislikes, special interests or hobbies, areas of strength or weakness, significant changes in school or at home that your child has experienced in the past, etc.)? If yes, please explain:



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## Family Profile

### Your Family's Expectations and Goals

What particular programs would you, as parent(s), like your child(ren) to experience?

What would your child(ren) like to gain from their Hebrew School experience?

- I give permission for my child's photograph or video image to be published in any form of media, via print or electronic (e.g. video, internet, synagogue web site)
- I DO NOT give permission for my child's photograph or video image to be published in any form of media, via print or electronic (e.g. video, internet, synagogue web site)

### Parent Volunteer

Part of the CBS Hebrew School experience is making the Hebrew School a kehillah kedosha, a holy community. We request that you sign up to participate in one or more of the following volunteer activities.

#### Parent 1

- I am interested in (please check all that apply):
- The Parent Teacher Advisory Committee
  - Becoming a Class Parent
  - Being a Shabbat Buddy
  - Setting up/Clearing up at the Model Seder
  - Setting up/Clearing up at the Charoset Contest
  - Setting up/Clearing up at Shabbaton Luncheons
  - Setting up/Clearing up at the Tu B'Shvat Seder
  - Fund-raising
  - Tutoring a student in Hebrew
  - Chaperoning a field trip
  - Other \_\_\_\_\_

Do you have any other hobbies, special interests, or skills you would like to contribute?

#### Parent 2

- I am interested in (please check all that apply):
- The Parent Teacher Advisory Committee
  - Becoming a Class Parent
  - Being a Shabbat Buddy
  - Setting up/Clearing up at the Model Seder
  - Setting up/Clearing up at the Charoset Contest
  - Setting up/Clearing up at Shabbaton Luncheons
  - Setting up/Clearing up at the Tu B'Shvat Seder
  - Fund-raising
  - Tutoring a student in Hebrew
  - Chaperoning a field trip
  - Other \_\_\_\_\_

Do you have any other hobbies, special interests, or skills you would like to contribute?



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## Tuition/Fee Schedule and Remittance Form 2014-2015/5775

*(Please see next page for grade-by-grade fees)*

The next page lists the Tuition Fees at Congregation Beth Shalom for our growing Hebrew School for 2015-2016/5776. Included in the fee for each child are the cost of books, supplies, and a myriad of programs in which our children participate throughout the year. The fee does not include field trips and kiddushes/onegs/dinners for each class. The following is a list indicating the activities this fee covers: daily snack, super snack for five Shabbatons (the weeks that we meet on Shabbat instead of on Sunday), graduation presents, Tu B'Shevat foods and supplies, Model Passover Seder supplies, Lag B'Omer treats, festive treats for holiday parties; breakfast for 7<sup>th</sup> grade Kehillah class; dinner for confirmation class. **Note: Parents may purchase additional textbooks to use at home. Contact Cantor Elisa for more information.**

**This year we will offer an early bird discount on tuition charges if paid in full by check by July 31, 2015.**

Grade	Sundays	Tuesday
Halutzim (Pre-K)	10:00 – 12:15	
Gan (Kindergarten)	9:00 – 12:15	
Aleph (1 <sup>st</sup> Grade)	9:00 – 12:15	
Kitah Bet – Kitah Vav (2 <sup>nd</sup> – 6 <sup>th</sup> )	9:00 – 12:15	4:00 – 6:15
Kehillah (7 <sup>th</sup> )	10:00 – 12:15	
8 <sup>th</sup> -10 <sup>th</sup> graders may enroll in our Confirmation Class, meeting two Thursdays a month, from 6:00-7:30pm, including dinner.		

As a “Frameworks for Excellence” model congregational school we have 5.5 hours of quality Jewish education starting in the 2<sup>nd</sup> grade, plus family education, art projects and music/dance instruction, and additional programs. We are a Model II and Model V congregational school as put forth by the United Synagogue of Conservative Judaism. View the “Frameworks for Excellence” guidelines on the USCJ website at [www.uscj.org](http://www.uscj.org).

Like the last several years, we are providing you with two tuition rates:

1. An actual (“unsubsidized”) rate – **this is the actual cost of each child’s enrollment in our programs, including all fees, materials, staff, and supplies.** *While we ask that you pay this rate if you are financially able to do so, it is provided only to inform you of the actual cost of each child’s formal Jewish education.*
2. A subsidized (“standard”) rate – **this is 50% of the actual cost of each child’s enrollment in our programs, including all fees, materials, staff, and supplies.** *The Congregation Beth Shalom General Budget covers the other 50% of each child’s actual costs as enrolled members of the Hebrew School.*

**Families of students grades Gan-Kehillah must be members of Congregation Beth Shalom.**



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Child(ren)	Grade Level	Days Per Week	Early Bird Fee (by 7/31/15)	Fee	Sub-Total
	Halutzim – 3, 4, & 5 year olds	Sundays only (10:15 – 12:15)		\$1000.00 (actual)	\$
			\$470	\$500 (subsidized)	\$
	Kindergarten (Gan)	Sundays only (9-12:15)		\$1160.00 (actual)	\$
			\$570	\$580.00 (subsidized)	\$
	1 <sup>st</sup> Grade (Aleph)	Sundays only (9-12:15)		\$1160.00 (actual)	\$
			\$570	\$580.00 (subsidized)	\$
	2 <sup>nd</sup> Grade (Bet)	Sundays & Tuesdays		\$1680.00 (actual)	\$
			\$830	\$840.00 (subsidized)	\$
	3 <sup>rd</sup> Grade (Gimmel)	Sundays & Tuesdays		\$1680.00 (actual)	\$
			\$830	\$840.00 (subsidized)	\$
	4 <sup>th</sup> Grade (Dalet)	Sundays & Tuesdays		\$1680.00 (actual)	\$
			\$830	\$840.00 (subsidized)	\$
	5 <sup>th</sup> Grade (Hey)	Sundays & Tuesdays		\$1680.00 (actual)	\$
			\$830	\$840.00 (subsidized)	\$
	6 <sup>th</sup> Grade (Vav)	Sundays & Tuesdays		\$1680.00 (actual)	\$
			\$830	\$840.0 (subsidized)	\$
	7 <sup>th</sup> Grade (Kehillah)	Sundays only (10:00-12:10)		\$1050.00 (actual)	\$
			\$520	\$525.00 (subsidized)	\$
	8 <sup>th</sup> -10 <sup>th</sup> Grade Confirmation	2 <sup>nd</sup> & 4 <sup>th</sup> Thursday each month (6-7:30pm);		\$700.00 (actual)	\$
			\$345	\$350.00 (subsidized)	\$
	11 <sup>th</sup> – 12 <sup>th</sup> Grade Continuing Ed			\$700.00 (actual)	\$
			\$345	\$350.00 (subsidized)	\$
Please consider donating to our Scholarship fund to allow those who cannot afford tuition to attend our Hebrew School this year. Thank you so much.				Hebrew School Scholarship Fund	\$
				<b>Total</b>	\$

**Please make checks payable to Congregation Beth Shalom.**

Registration will not be processed without full payment or arrangements for payment.

Please pay in full or contact Sam Nussbaum, Executive Director (302-654-4462) for alternative payment arrangements.

For credit card payments, please contact Marlene Greenberg, [msgreenberg@cbswilmde.org](mailto:msgreenberg@cbswilmde.org) or 302-654-4462 x17.