



Religious and Hebrew School Registration, 2009/2010 School Year

It is our goal at Temple Beth Tikvah to make TBT Religious School available to every family that wishes to participate. When necessary, special financial arrangements can be made. Please contact our Treasurer, Jeff Adler, at jadler@bendcalble.com or 541-318-6216 or our Director of Education, Allison Cogen, at allisoncogen@gmail.com or 541-383-8811. All information will be kept strictly confidential.

Parent/s Name/s: _____

Preferred Family Email/s: _____

Child 1: _____ Date of Birth _____ Age as of 9/09 _____ Grade _____

Hebrew name: _____

Child 2: _____ Date of Birth _____ Age as of 9/09 _____ Grade _____

Hebrew name: _____

Child 3: _____ Date of Birth _____ Age as of 9/09 _____ Grade _____

Hebrew name: _____

Child 4: _____ Date of Birth _____ Age as of 9/09 _____ Grade _____

Hebrew name: _____

Children's Address:

Street: _____ City: _____ Zip: _____

Phone number: _____ Cell Phone: _____

Doctor: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Does your child/children have any allergies or medical issues? Please explain.

Parent/s Address/es [if different from child]:

Street _____ City: _____ Zip: _____

Parent 1: _____

Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

Parent 2: _____

Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

RELIGIOUS SCHOOL TUITION

Temple Beth Tikvah provides tuition discounts for families with multiple children who are simultaneously enrolled. Our fees include books and materials.

To enroll in TBT Religious School, families must be TBT members. However, for the 2009/2010 school year, Temple Beth Tikvah is waiving our \$750 membership fee for new families who enroll children in our religious school. Families need only fill out the membership form, which is available at www.bethtikvahbend.org.

In addition, for the 2009/2010 school year, religious school tuition will be waived for current TBT members.

SUNDAY SCHOOL

Name	By Aug. 15	After Aug. 15
Child 1: _____	\$130_____	\$150_____
Child 2: _____	\$105_____	\$125_____
Child 3: _____	\$95_____	\$115_____
Child 4: _____	\$95_____	\$115_____

HEBREW INSTRUCTION

Name	By Aug. 15	After Aug. 15
Child 1: _____	\$160_____	\$180_____
Child 2: _____	\$130_____	\$150_____
Child 3: _____	\$120_____	\$140_____
Child 4: _____	\$120_____	\$140_____

Total Tuition \$_____

You may pay annually, semi-annually or quarterly. Your first payment must accompany this registration form. Please set up your payments to be paid at the appropriate time. We do not routinely send out statements.

Please mail this form with your enrollment check to:

Temple Beth Tikvah
P.O. Box 7472
Bend, OR 97708-7472.