

Temple Beth Israel
Religious and Hebrew School Registration
(Please complete one (1) form for each child)
Circle Grade in which your child will be enrolled for the
Academic Year 5778 (2017-2018)



Parent/Tot Pre-K K 1st 2nd 3rd 4th 5th 6th 7th
 Gesher: 8th 9th

Child's Name:		Hebrew Name:	
Child's Address:			
City:	Illinois	Zip:	Home Phone:
Parent's Email (all school communication is done via email – please print clearly)			
Primary:		Secondary:	
Secular School Grade 2017-2018:		School Name:	Phone:
Date of Birth:		Gender:	
Parent #1 Name:		Parent #2 Name:	
Business Phone:		Business Phone:	
Cell/Pager/Beeper:		Cell/Pager/Beeper:	
Home Address (if different from child's)		Home Address (if different from child's)	
Emergency Contact Numbers			
Name:		Name:	
Relationship:		Relationship:	
Phone:		Phone:	
If separated or divorced, to whom should mail be sent:			

Temple Beth Israel
Religious and Hebrew School Registration 2017-2018
(Please complete one (1) form for each child)



Tuition

A check for **FULL** tuition would be appreciated at time of registration. A minimum of **\$75.00** per child per program **MUST** accompany each registration. **Complete fees must be paid by January 1, 2018.** Please indicate the fees enclosed.

		Discount for Cash/Check	Paid by Credit Card	Amount Submitted
<input type="checkbox"/>	Religious School Tuition Parent/Tot – 7 th Grade	\$440.00	\$460.00	
<input type="checkbox"/>	Hebrew School Tuition 3 rd Grade – 7 th Grade	\$420.00	\$440.00	
<input type="checkbox"/>	Bar/Bat Mitzvah Fee September, 2017 – August, 2018	\$950.00	\$980.00	
<input type="checkbox"/>	Gesher Program Grades 8 th & 9 th	\$200.00	206.00	

Please read and sign below

Room Parents

I would like to volunteer to be a room parent

Parent's Signature _____ Date _____

Field Trip Permission

Child's Name _____ **Grade** _____

I give my son/daughter permission to attend Temple Beth Israel Religious School field trips during the school year 2017-2018. I will assume responsibility for my child's actions and I will allow him/her to be treated by proper medical personnel should the need arise – at the discretion of the Religious School staff.

Parent's Signature _____ Date _____

Temple Beth Israel
Religious and Hebrew School Registration 2017-2018
(Please complete one (1) form for each child)



Medical Information

To help us program successfully for your child, please complete the following questionnaire, and return it with your registration form. A form must be filled out for each child, even if nothing is relevant at this time. Registration forms without the medical form included will not be accepted. If your child has special needs in any of these areas, please check the item(s) and add any additional pertinent information. (If you need additional space, please use the reverse side of this form.) Please notify the school office of any changes during the school year in order that we can best serve your child. All information will remain confidential. Thank you for your cooperation.

Student's Name:	
Parent's Name:	Phone Number:

<input type="checkbox"/>	Learning or Reading Disabilities: Should we modify any reading or writing expectations? What are the approaches that would help your child learn better?
<input type="checkbox"/>	Social or Emotional Difficulties: In what ways should we be extra sensitive to your child's social interactions? Are there other children with whom your child has particularly poor social interactions?
<input type="checkbox"/>	Physical or Medical Problems: Does your child take any medications for Attention Deficit Disorder or emotional concerns such as depression? Do allergies interfere with your child's alertness or hearing during some seasons? Should your child avoid certain foods or activities? Does your child require preferential seating because of hearing, vision or other?
<input type="checkbox"/>	Medication: Please list any medication your child is currently taking.
<input type="checkbox"/>	Family Problems: Have there been any family changes such as illness, death, divorce, moves or income status which may have a negative impact on your child's attention and school performance? If so, please explain.
<input type="checkbox"/>	I would like to be contacted personally by my child's teacher.

Statement of Vaccination Status



Given the overriding Jewish value that puts a premium on the maintaining of health, including the taking of preventative measures, along with the clear public health based need to protect the community as a whole, **we are requiring that all children enrolled at Temple Beth Israel be immunized in the manner determined by their pediatrician and other health professionals that is in concert with Illinois guidelines.**

My child/ren is current with their immunizations according to State of Illinois guidelines.
Date of last immunizations _____

My child/ren has a medical exemption. I am willing to discuss this with a designated pediatrician of TBI's choosing. (Your child and your privacy will be protected).

My child/ren is not immunized.

Family Last Name _____

Child #1 Name _____

Child #2 Name _____

Child #3 Name _____

Child #4 Name _____

The information I have listed above is true and accurate

Parent's Signature _____

Phone number _____ Email address _____

This form will be kept secure and will only be available to TBI school administration.

**Temple Beth Israel Schools
Plan for 2017-2018 Academic Year**



School Hours

Religious School 9:00am-11:00am on Sundays
Hebrew School 11:10am-12:10pm on Sundays
Hebrew School 4:15pm-6:00pm on Wednesdays

Opening Religious/Hebrew School Day Sunday, September 10, 2017

Opening Hebrew School Day Wednesday, September 6, 2017

Attendance The faculty and staff of TBI work diligently to provide the finest Religious and Hebrew education we can. Consistent attendance is critical to the success of our program.

Chugim 6-8 week enrichment classes will be offered for children in Grades K-2nd and in some cases Pre-K during the Sunday Hebrew instruction time. These classes may include Jewish art, music and movement, cooking, Hebrew enrichment and others. We are looking for parent volunteers who would be interested in teaching one or more 6-8 week classes through the school year. Parents who want to “pair up” to teach would be welcome as well.

On-site Registration will take place on
Sunday, May 21, 2017 beginning at 9:00am in Mendelsohn Hall

Religious School will meet Sunday Mornings, 9:00am – 11:00am for all grades

Hebrew School will meet Sunday Mornings, 11:10am – 12:10pm **AND** Wednesdays 4:15pm – 6:00pm

Religious School

Sundays 9:00am – 11:00am

Opening Day September 10

No school on the following Sundays

October 1

November 26

December 24

December 31

February 18

March 25

April 1

Last Day May 20

Hebrew School

Sundays 11:10am – 12:10pm

Wednesdays 4:15pm – 6:00pm

Opening Day September 6

No School on the following Wednesdays

September 20

November 22

December 27

April 4

Last Day May 16