



TEMPLE
BETH
SHOLOM
Religious School

401 Roslyn Road, Roslyn Heights, NY 11577
516-484-4980 516 621-2288 x 118/119
ReligiousSchool@tbsroslyn.org

2019-2020

REGISTRATION FORM

This form must be returned by June 3, 2019
PLEASE WRITE LEGIBLY.

FAMILY NAME: _____

ATTACH A RECENT
PHOTO
OF YOUR CHILD TO THIS
REGISTRATION FORM.

Child's Full Name (first/last)	Date of Birth
Child's Hebrew Name	Gender
Public/Private School	Grade (September 2019)
Grade in Religious School in September 2019 <input type="checkbox"/> Gan (Kindergarten) <input type="checkbox"/> Daled (4th Grade) <input type="checkbox"/> Aleph (1st Grade) <input type="checkbox"/> Hay (5th Grade) <input type="checkbox"/> Bet (2nd Grade) <input type="checkbox"/> Vav (6th Grade) <input type="checkbox"/> Gimel (3rd Grade) <input type="checkbox"/> Zayin (7th Grade) <input type="checkbox"/> Makom (8th Grade)	Home Address Street Town/Zip Home Phone
Preferred Email Address (required—please write legibly) _____@_____	Student Email (Makom 8th grade students only) _____@_____
Additional email (if desired) _____@_____	Student Cell # ((Makom 8th grade students only)
Parent #1 Name	Parent #1's Hebrew Name
Parent #1 Cell #	Parent #1's Business #
Parent #2 Name	Parent #2's Hebrew Name
Parent #2 Cell #	Parent #2's Business #
Names & Ages of siblings	
SPECIAL NEEDS/ACCOMODATIONS: To get a better understanding of your child's needs , please indicate in the space provided what services he or she is presently receiving in school, i.e. resource room, reading, speech,, occupational therapy, self-contained classroom, teacher aide, etc. <ul style="list-style-type: none"> Please indicate if your child is assigned a shadow in public school. If your child has a behavioral plan or IEP, please send a copy along with the registration so that we can best serve your child's needs. 	Please explain:
Does child have any MEDICAL ISSUES? (i.e.— Allergy needs)	Please explain:
I hereby grant PERMISSION for my child's photo to be shown on the Temple Beth Shalom website or Facebook page without an identifying name.	Please initial in the appropriate place. _____Yes _____No
I hereby grant PERMISSION for the PTA and my child's class parent to have access to my phone number and email.	Please initial in the appropriate place. _____Yes _____No
CAMP QUESTION: If you are sending your child to camp (day camp or sleep-away) this summer, please indicate name of camp:	Camp Program:
EMERGENCY CONTACT INFO: First/Last Name _____ Relationship to child _____ Home #: _____ Cell #: _____	Physician's Name _____ Physician's # _____
CLASS PLACEMENTS ARE TAKING PLACE IN JUNE. REQUESTS WILL BE HONORED ON A FIRST-COME, FIRST-SERVE BASIS.	DATE REGISTRATION RECEIVED BY RELIGIOUS SCHOOL OFFICE _____ <i>continued on next page</i>

CLASS SCHEDULE & FEE SCHEDULE

CLASS SCHEDULE: Below we have listed the day(s) and time(s) each class will meet in the 2019-2020 school year.
To register, return these registration forms with your deposit (see payment policy below) by June 3, 2019.

- GAN** (Kindergarten) Sunday 9:00 am to 12:00 pm
Attendance at Shabbat Minyanim is required 4 times
- ALEPH** (1st Grade) Sunday 9:00 am to 12:00 pm
Attendance at Shabbat Minyanim is required 4 times
- BET** (2nd Grade) Sunday 9:00 am to 12:00 pm AND Tuesday 4:00 to 6:00 pm
Attendance at Shabbat Minyanim is required 4 times
- GIMEL** (3rd Grade) Sunday 9:00 am to 12:00 pm AND Tuesday 4:00 to 6:00 pm
Attendance at Shabbat Family Study/Minyanim is required 8 times
- DALED** (4th Grade) Sunday 9:00 am to 12:00 pm AND Tuesday 4:00 to 6:00 pm
Attendance at Shabbat Family Study/Minyanim is required 8 times
- HAY** (5th Grade) Sunday 9:00 am to 12:00 pm AND Tuesday 4:00 to 6:00 pm
Attendance at Shabbat Family Study/Minyanim is required 8 times
- VAV** (6th Grade) Sunday 9:00 am to 12:00 pm AND Thursday 4:00 to 6:00 pm
Attendance at Shabbat Family Study/Minyanim is required 12 times
- ZAYIN** (7th Grade) Sunday 10:00 am to 12:00 pm AND Monday 6:30-8:30 pm
Attendance at Shabbat Family Study/Minyanim is required 12 times
- MAKOM** (8th Grade) Monday 6:30-8:30 pm
- TIKVAH** (Special Needs) Special arrangements to be determined by Religious School Director

FEE SCHEDULE: comprised of Tuition plus Book Fee

GRADE	TBS MEMBER	NON-MEMBER	BOOK FEE
Gan (Kindergarten)	\$ 1050	\$ 1,300	\$135
Aleph (1st grade)	\$ 1050	\$ 1,300	\$135
Bet (2nd grade)	\$ 1,300	\$ 2,200	\$135
Gimel (3rd grade)	\$ 1,300	N/A	\$135
Daled (4th grade)	\$ 1,300	N/A	\$135
Hay (5th grade)	\$ 1,300	N/A	\$135
Vav (6th grade)	\$ 1,300	N/A	\$135
Zayin (7th grade)	\$ 1,300	N/A	\$135
Makom (8th grade)	\$500	\$650	n/a
Tikvah (Special needs)	\$ 1,600	\$ 2,200	\$135

TBS Religious School offers a 10% discount for each additional child registered in Religious School. Check here if applicable _____
(Specify sibling/grade below): _____

PAY IN FULL BY JUNE 17, 2019 & RECEIVE A DISCOUNT OF \$ 50. REFER A FRIEND WHO REGISTERS FOR RS & GET \$50 DISCOUNT PER NEW FAMILY.

REGISTRATION AGREEMENT:

A non-refundable DEPOSIT OF \$200 PLUS BOOK FEE OF \$135 IS REQUIRED AT TIME OF REGISTRATION. (TOTAL \$335 DUE AT REGISTRATION)

The balance of the tuition is to be paid in two parts:

First half due **SEPTEMBER 3, 2019** AND Second half due **DECEMBER 2, 2019**

PLEASE NOTE: REGISTRATION WILL ONLY BE ACCEPTED IF FAMILY IS CURRENT ON ALL TBS FEES FOR YEAR ENDING JUNE 28, 2019

I/We understand and agree to the following regarding enrollment at Temple Beth Sholom's Religious School ("the School")

- The School reserves the right to refuse or cancel registration and enrollment at any time for reasons of health, safety or emotional problems that the school deems may endanger the welfare of the children.
- The School will not be responsible or liable for the transportation of the students to and from Religious School.
- The School is not responsible for the students before official arrival to the School or after dismissal from the School.
- The School will be closed when the safety of the students may be endangered, such as on days of severe storm or dangerous road conditions and follow the Roslyn School District school closings.
- The School does not retain medical staff on site.
- Placement in an age-appropriate class and choice of teacher shall be made at sole discretion of the School.
- The designated tuition and book fee for my child will be made according to the following schedule: Second payment is due on September 3, 2019 and third payment is due on December 2, 2019. **Payments may be made by cash, credit card or check payable to TEMPLE BETH SHOLOM.**

Office Use ONLY	
Deposit Received \$	_____
Date	_____
Staff Signature:	_____

SIGNATURE _____ **DATE** _____