

Live It! Learn It! Love It!

2018 - 2019 Registration Application

Student Information

Child's Last Na	nme:		Gender: M 🗖 F 🗖						
First Name:			Hebrew Name:						
Street Address	S :		City:		_ Zip:				
Birthday:	_//	Time of Birth:	AM ,	/ PM	Age:				
School:		Grade:	Home Phone	:: ()				
Parent's Info	<u>rmation</u>								
Father's Name: Hebrew Name:									
Father's Cell: Father's Email:									
Is Father:	Kohen □ Levi	□ Israel	☐ Neither ☐	J					
Mother's Name: Hebrew Name:									
Mother's Cell: Mother's Email:									
Is Mother:	Born Jewish □	Jew by Choice	□ Neither □						
Are you affiliated with any synagogue? Yes □ No □ If Yes, Which one(s)									
Occupations Father: Mother:									
Student Hebrew Education									
Previous Hebrew Education:									
Does your child read basic Hebrew? Alef-bet Letters ☐ Vowels ☐ Words ☐ Fluent ☐									
Does your child have a particular learning style or learning challenge?									
Were there any conversions and/or adoptions in the family? Yes □ No □ If yes, please explain									
Medical Information									
Are there any medical or other information which we should be aware of? (Confidential)									



Emergency Contact Information

Person to be contacted in case of an emergency when parents cannot be reached. _____ Telephone # Name: _____ City/Town Relationship to child: Telephone # Family Physician: Medical Insurance Co.: _____ Policy # **Medical Release Form** Participating in any Chabad Hebrew School activities and use of recreational facilities involves a risk of accidental injury despite all safety precautions. Having been informed of the activities to be conducted by the Chabad Hebrew School I/We as an individual or as a parent/guardian of the participants named herein, assume all risk and hazards incidental to the activities and release from responsibility and agree to indemnify and hold harmless to the CHS /Chabad of Nashville, its officers, directors, independent contractors, volunteers and all employees for any illness or injury to me, my children or family members occurring during his/her participation in any activities or any recreational facilities at/or conducted by CHS/Chabad of Nashville. In case of emergency, I authorize Chabad Hebrew School to obtain medical treatment for children. Signature of Parent:

Please mail or bring forms to:

Date: ______

The Bertram & Beatrice King Chabad Hebrew School 95 Bellevue Road, Nashville, TN 37221



Schedule and Tuition Information 2018–2019

The Bertram & Beatrice King Chabad Hebrew School welcomes children ages 3–13.

- We will meet for 26 Tuesday afternoons throughout the academic year from 4:00 pm - 5:30 pm. We will also have additional Shabbat/Saturday mornings from 11:10 am - 11:50 am for extra Aleph Champ reading and learning & experiencing the Torah portion and its values. Families are always invited to join the Shabbat Day lunch.
- A calendar for the year will be emailed to you upon receipt of this application.
- Our scholastic year includes seasonal extracurricular Jewish fun, art and multi-media activities with our in-house artist.

Tuition for year: \$650.00 Book fee: \$50.00

No child will be turned away for lack of funds. For more information, please inquire with the office.

HEBREW SCHOOL TUITION AGREEMENT 2017-2018

The following document is a tuition agreement for The Bertram & Beatrice King Chabad Hebrew School. The agreement explains the tuition fees, payments plans and refund policies. Please read through it carefully and sign. The signed tuition agreement along with full payment must be submitted to the school office before any child will be permitted to attend classes.

The tuition for the Chabad Hebrew School is \$650.00 per year per child for the scholastic school year + the \$50.00 book fee. You may choose from the following payment methods:

PLAN A: You may pay the entire amount in full entitling you to a \$25.00 discount.

PLAN B: You may pay the tuition in two installments. All checks should be submitted by the first day

of Hebrew School.

You may use your Visa, Discover, American Express or Master Card to pay the tuition. To do so, please **pay online** at chabadnashville.com/CHSPayment or **fill out the form below**.

Please sign indicating that you've read and agree to this tuition agreement:

Signature:	: Date:								
Credit Card Information Credit Card payments can also be made at chabadnashville.com/CHSPayment									
 Visa 	 Discover 	cover • MasterCard • American Express							
Card Number:									
Name on Card:									
Expiration Dat	te:/	/ Amount to be Charged: \$							
Billing Address	s:								
		Street Address	City	State	Zip				
	Date:								
By signing, you are authorizing this credit card to be charged the amount indicated above.									