

Registration Form

Beit Ahavah Community School 2007-2008/5768

Student 1 Name: _____ Birthdate: _____
School: _____ Grade as of 9/07: _____

Student 2 Name: _____ Birthdate: _____
School: _____ Grade as of 9/07: _____

Student 3 Name: _____ Birthdate: _____
School: _____ Grade as of 9/07: _____

Parent/Guardian 1 Name: _____
Address: _____
Home phone: _____ Cell phone: _____ Work phone: _____
Email: _____ Relationship: _____

Parent/Guardian 2 Name: _____
Address: _____
Home phone: _____ Cell phone: _____ Work phone: _____
Email: _____ Relationship: _____

Please tell us about your child's previous Jewish education:

What else would be helpful for us to know about your child/family?



Tuition Form

Beit Ahavah Community School 2007-2008/5768

Please note:
Membership in the congregation is a prerequisite for attending the school.

Student name(s) and age(s): _____

Please check all that apply:

Kef Mishpachah (K-2nd grade) (two Sundays/month; one session per month embodies a Family Fun education program) 3:30-5:30pm

___ Members \$90/family (or \$60 for 2nd Child enrolled in Religious School) suggested donation to support family and younger school programs at Beit Ahavah

___ Non-members \$180/family (note: this program is open to non-members)

Sunday Religious School (3rd-8th) 3:30-5:30pm

___ Child 1 \$365

___ Child 2 \$300

___ Child 3 \$280

___ 7th-8th/Grade Jewish European History Class \$240

Thursday Hebrew & Tefillah (4th-7th) 4:00-5:30pm

___ Child 1 \$365

___ Child 2 \$300

___ Child 3 \$280

Thursday B'nei Mitzvah Class

(required for those celebrating becoming Bar or Bat Mitzvah before October 2008) 5:45-6:45pm

___ \$365

Tikkun Olam Club (6th-8th) (one Sunday/month, mid-morning, times TBA)

___ \$120 suggested donation to support teen programs at Beit Ahavah

Jewish Cooking, Culture & Media (9th-12th) (two Sundays/month) 11:00am-1:00pm

___ \$210 suggested donation to support teen programs at Beit Ahavah

TOTAL TUITION DUE: \$_____

Payment options (please check one)

- | | | | |
|--------------------------|---|--------------------------------------|----------|
| <input type="checkbox"/> | 1 | Payment in Full enclosed | \$ _____ |
| <input type="checkbox"/> | 2 | 50% of payment due upon registration | \$ _____ |
| | | 25% of payment due December 3 | \$ _____ |
| | | Remainder due March 3 | \$ _____ |



Make checks payable to Beit Ahavah and mail to:

Beit Ahavah Community School

P.O. Box 60389, Florence, MA 01062

Questions? Call 413-587-3770