

Family Education Program Enrollment Form 2018-2019/5779

Date _____

Family last name _____

First name(s) of parent(s) _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Email _____

Cell _____ Cell _____

Child(ren)

First name _____ Last name _____ Age _____

First name _____ Last name _____ Age _____

First name _____ Last name _____ Age _____

Please enroll our children in the following (check all that apply):

- Gan Haggim** (up to age 5); \$220 per child/\$400 for siblings
- My Jewish Discovery** (ages 6-8); \$230 per child/\$430 for siblings
- Biblical Characters in World's Art** (ages 9-11); \$230 per child/\$430 for siblings
- Jewish History** (ages 12-13); \$230 per child/ \$430 for siblings

- Suggested donation to Yom Rishon School to support these vital programs is \$180 per family.**

Amount due for family enrollment \$ _____

Donation to Yom Rishon School \$ _____

TOTAL AMOUNT DUE \$ _____

- Our full payment is enclosed (check payable to Yom Rishon School)
- Our first payment in the amount of \$ _____ is enclosed; please bill us for the balance on a quarterly basis between now and December 1, 2018

**REGISTRATION FORM AND PAYMENT DUE BACK TO YOM RISHON SCHOOL
BY AUGUST 30th. PLEASE SEND THE FILLED FORM WITH THE PAYMENT TO:
Natalia Tsvibel, Congregation Beth Am, 26790 Arastradero Rd., Los Altos Hills, CA 94022**

For any questions please contact Natalia Tsvibel at 408. 605. 4702 or ntsvibel@yomrishon.org. No families are turned away from our programs for financial reasons.