

**CONGREGATION B'NAI TORAH
RELIGIOUS SCHOOL**

403 North Nova Road
Ormond Beach, FL 32174

RELIGIOUS SCHOOL STUDENT REGISTRATION FORM (2015-2016)

Student's Name: _____ **Date of birth:** _____

Student's Hebrew Name _____

Religious school grade, effective August, 2015: _____

Parents' name _____ **Member?** _____

Parents' address _____

Mailing address _____

Daytime phone _____ **Evening phone** _____

Cell phone _____ **E-mail** _____

Emergency contact, name, relationship, phone _____

Parent's Signature

NOTE: Submission of this form indicates that the parents agree to the current fee schedule, \$300.00 for one student, additional students \$275.00 per student. Please make checks payable to Congregation B'nai Torah Religious School. Fees should be paid prior to September 15, 2015. Please see Charles Moskowitz if arrangements need to be made.