



OHR CHADASH RELIGIOUS SCHOOL

A joint program of Hillcrest Jewish Center, Hollis Hills Bayside Jewish Center & Israel Center of Conservative Judaism

www.ohrchadashqueens.org (914) 741-1257

Hillcrest Jewish Center
183-02 Union Turnpike
Flushing, NY 11366
718-380-4145
www.hillcrestjc.org

Hollis Hills Bayside Jewish Center
210-10 Union Turnpike
Hollis Hills, NY 11364
718-776-3500
www.hollishillsjc.org

Israel Center of Conservative Judaism
167-11 73rd Avenue
Flushing, NY 11366
718-591-5353
www.iccj2004.org

ENROLLMENT/TUITION CONTRACT: 2017-2018

Date _____ Synagogue Affiliation: HJC ICCJ HHBJC Non-Member

Student's Last Name _____ First Name _____ Hebrew Name _____

Address _____

Date of Birth _____ *(Religious School Class--office use)* _____

School Grade (as of Sept. 2017) _____ Name of School: _____

Parent / Guardian 1 Contact Information

Parent / Guardian 2 Contact Information

Name _____

Name _____

Phone # _____

Phone # _____

Email _____

Email _____

Emergency Contact (other than parent) _____ Relationship _____ Phone: _____

Who is designated to pick up your child? List names(s) & Phone #(s): _____

Please inform us of any allergies/medications or any other special instructions: _____

Please describe your child's learning style (strengths & opportunities): _____

What are your goals for your child this year? _____

How did you hear about Ohr Chadash Religious School? _____



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Class Schedule: on-site weekly Sunday classes from 9:00 AM – 12:30 PM from September 10, 2017 - June 3, 2018. An off-site curriculum with direct personal instruction will be provided.

Tuition & Fees: We accept checks (made out to **OHR CHADASH RELIGIOUS SCHOOL**), cash, credit cards or money orders. A minimum of 50% of the tuition is due by September 10, 2017; a minimum \$100 deposit must accompany the registration form for each child. Full tuition payment is due by December 1, 2017. There are no partial tuition waivers for late enrollments. There are no refunds.

- Member of HJC, HBJ or ICCJ: \$650
- Unaffiliated or Non-member: \$975
- Parent Association Membership: \$36 (per family, not child)

Discounts:

- Early bird (full tuition paid before Sept 1, 2017): \$50 (per child)
- Sibling discount (for each additional registration): \$25 (per additional child)
- New student referral (not siblings) \$50 (per newly enrolled students)

I hereby enroll my child in the **Ohr Chadash Religious School** and agree to pay the tuition fees as indicated on the Tuition Form under the terms indicated below. I accept the terms and conditions of payment as outlined in the Enrollment/Tuition Contract by returning this signed contract along with payment as follows:

TUITION (\$650 members or \$975 non-member): \$ _____

Discount: Sibling / New student Referral: - \$ _____

Discount: \$50 early bird (if applicable): -\$ _____

Sub Total \$ _____

Parent Association Dues (\$36 per family): \$ _____ < \$0 if previously covered >

Total Amount of Tuition and PA dues \$ _____

Total Amount Enclosed \$ _____

Balance Due \$ _____

Parent Signature _____ Name _____ Date _____

Please return directly or by mail to the ICCJ business office

FOR OFFICE USE ONLY: Received by: _____ **Date:** _____ **Total \$:** _____



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Release Form for Media Recording

I, the undersigned, do hereby consent and agree that Hillcrest Jewish Center, Hollis Hills Bayside Jewish Center, and Israel Center of Conservative Judaism, their employees, or agents have the right to take photographs, videotape, or digital recordings of (Student name) _____ beginning on September 10, 2017 and ending on June, 2018 and to use these in any and all media, now or hereafter known, and exclusively for the purpose of Ohr Chadash Religious School programs and activities. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to Hillcrest Jewish Center, Hollis Hills Bayside Jewish Center, and Israel Center of Conservative Judaism their agents and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I also understand that Hillcrest Jewish Center, Hollis Hills Bayside Jewish Center and Israel Center of Conservative Judaism are not responsible for any expense or liability incurred as a result of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I represent that I am the parent/guardian of the minor named above on this form and am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name: _____ Date: _____

Address: _____

Phone: _____ Relationship to student: _____

Signature: _____

Please return directly or by mail to the ICCJ business office