

B'nai Israel Reform Temple
Religious School

67 Oakdale-Bohemia Road Oakdale, New York 11769
(631) 563-1660

Spring 2023

Dear Parent:

Registration for the September 2023 - May 2024 school year will take place during the months of June and July. This will enable us to plan more effectively throughout the summer for an orderly opening of school in September. Registration will take place by email.

You will receive your child's student schedule the first day of school.

Please complete one registration form per family. A Confidential Personal Student Profile form must be filled out for **each** child being registered (including those being re-registered) and returned with the registration form.

Please complete the registration and confidential forms as thoroughly and accurately as possible so that the Board may provide the most beneficial religious education for your youngster(s). Registration forms should be returned to the Temple office as soon as possible. Please indicate on the registration form whether you plan to pay by check, credit card, or cash. Also let us know if you wish to be billed monthly.

Registration forms must be emailed to Office@bnai-israel.org

or mailed to: B'nai Israel Reform Temple, 67 Oakdale-Bohemia Rd, Oakdale, NY 11769

Please note that **after August 8th there will be a \$25 late registration fee** added to the tuition

If you have any questions regarding registration, please call Alice Lambert at 631 589-1375.

B'NAI ISRAEL RELIGIOUS SCHOOL - CLASS SCHEDULE FOR 2023-2024

<u>Grade</u>	<u>Day</u>	<u>Time</u>
Pre-School	2 Saturdays per month	9:30 -12:00
Kindergarten, 1, and 2	2 Saturdays per month	9:30 -12:00
3,4,5,6 & Special Needs	Every Saturday	9:30 -12:15
7	Every Monday	6:30 - 8:30
8 and 9	2 Mondays per month	6:30 - 8:30
High School	1 Monday per month	7:00 - 8:30

2023-2024 RELIGIOUS SCHOOL TUITION RATES

<u>Grade</u>	<u>Temple Members Tuition Fees*</u>	<u>Non-Temple Tuition Fees*</u>	<u>Non-Temple Under Grandparents Tuition Fees*</u>
Pre-School	No Fee	No Fee	No Fee
Kindergarten	No Fee	No fee	No Fee
1 - 2	\$425	\$1,050	\$675
3	\$755 1st Child \$680 2nd Child	\$1,905	\$945 1st Child \$870 2nd Child
4 - 7	\$880 1st Child \$770 2nd Child	\$2,015	\$1,080 1st Child \$970 2nd Child
8 - 9	\$425	\$1,040	\$665
High School	\$ 105	\$280	\$120

***After August 8, 2023, there will be an additional late fee of \$25.**

HOW TO DETERMINE YOUR TUITION

- Using the tuition schedule above, select the HIGHEST possible fee that would apply to ANY OF YOUR CHILDREN. Write that amount on the line to the right: \$ _____
- If you have a second child enrolled, the fee marked "2nd child" for his or her appropriate grade would apply. (Please note, some grades have only one fee.) Write the appropriate fee on the line to the right: \$ _____
- Add up the two amounts listed above and write the total on the line to the right. This is your annual tuition fee: \$ _____

NOTE: Any additional children in your family may be registered with no charge whatsoever.

RELIGIOUS SCHOOL REGISTRATION FORM 2023 - 2024

PRE-SCHOOL - GRADE 12

Temple Member (___) Non-Temple Member (___) Non-Temple Under Grandparents (___)

Mother's name _____
Last First

Father's name _____
Last First

Address _____
_____ Zip Code _____

Home Telephone _____ Email _____

Cell Phone #1 _____ Cell Phone#2 _____

Emergency Contact: Name _____ Telephone _____

REGISTRATION INFORMATION

Child's Name	M/F	Birth Date Mo/Day/Yr	Rel. Sch. Grade 9/23	Date Child turns 13	*Yrs In Rel Sch	Fee
Last First						
Last First						
Last First						
Last First						

Parent/Guardian _____ Date _____

*Total # of years in religious school before 2023-2024.

Payment

Check
Cash Do not mail
Credit card Please call the office.
Bill me monthly Include first month

For Office only

Total _____ Late Fee _____
Paid _____ Date _____
Balance Due _____
Rec'd By _____

CONFIDENTIAL PERSONAL STUDENT PROFILE 2023-2024

(All information will be kept confidential)

Student's Name _____
Last First Middle

Date of Birth ____/____/____ Male____ Female____

Address _____ Zip _____

Home Tel. # _____ Email _____

Mother's Name: _____ Cell# _____
Last First Occupation

Father's Name: _____ Cell# _____
Last First Occupation

Names of brothers and sisters Ages

1. Was child in Religious School last year? Yes____ No____

If Yes: Where? _____ What grade? _____

2. Did child attend Religious School before last year? Yes____ No____

If Yes: Where? _____

3. Does child have any problems in school? Yes____ No____ (Check where applicable)

a. Social _____ c. Intellectual _____ e. Reading _____
b. Emotional _____ d. Physical _____ f. Attention deficit Disorder _____
Glasses _____ g. Other _____
Hearing aid _____

Please elaborate: _____

4. Is child in special class in public school? _____

a. Resource? _____ b. Special Education? _____ C. Advanced? _____

5. Is child on any medication? _____ (Explain _____)

6. Does child have any allergies? _____ (Explain _____)

7. Is there any other information that you'd like us to know about your child?

(Explain) _____

Parent/ Guardian _____ Date _____