Congregation Beth Israel
Of The Berkshires

Please submit your completed registration form & payment by **Friday, August 30, 2024**.

Student's Name *(First & Last)*	Hebrew Name *(if one has already been chosen)*	Date of Birth *(MM/DD/YYYY)*	Gender	Secular Grade *(as of Fall 2024)*

Parent/Guardian 1:

Address:

☐ Please send mail to this address

Cell Phone:

Home Phone:
☐ N/A

Work Phone:
☐ N/A

Email:

Parent/Guardian 2:

Address:

☐ Same address   ☐ Please send mail to this address

Cell Phone:

Home Phone:
☐ Same   ☐ N/A

Work Phone:
☐ N/A

Email:

Name of Non-Parent/Guardian Emergency Contact:	Phone Number(s):
Relationship to Student(s):	

Are you a member of CBI?   *Yes*   *No*

Please let us know if your child has any medical or behavioral needs, such as allergies, medical conditions, medications, or individualized educational requirements, so that we can provide the appropriate support and care:

_____

_____

Please sign the following statements below as applicable:

1) *I give my consent for emergency medical treatment for my child(ren) in the event that they become ill or injured while under school authority when parents/guardians cannot be reached.*

    x _____

2) *I give permission for CBI to take photos of my child(ren) for use in CBI publications, both in print & online.*

    x _____

Jewish Journeys Tuition 2024–25

Classes will meet on **Monday** afternoons beginning **September 9, 2024**.
Shabbat presentations will be held on **December 14, 2024** & **May 10, 2025**.

Kindergarten – 2nd Grade	***FULL YEAR*** Member: $325 Non-Member: $425	
3rd–7th Grade ✻ *Excludes Materials Fees &* *B-Mitzvah Prep Course w/ R' Rachel*	***FULL YEAR*** Member: $395 *Includes 2 semesters of Hebrew classes* *& 2 semesters of Jewish Studies electives*	***PER ELECTIVE*** Member: $110 Non-Member: $125 *Includes 1 semester-long Hebrew class* *or Jewish Studies elective*

K–2nd GRADE

    MEMBER | *Full Year* $ **325** per child x _____ child(ren) = $ _____

    NON-MEMBER | *Full Year* $ **425** per child x _____ child(ren) = $ _____

3rd–7th GRADE ✻

    MEMBER | *Full Year* $ **395** per child x _____ child(ren) = $ _____

    MEMBER | *Per Elective* $ **110** per elective x _____ electives = $ _____

    NON-MEMBER | *Per Elective* $ **125** per elective x _____ electives = $ _____

✻ Any applicable Materials Fees will be billed separately once class rosters have been finalized.

6th & 7th grade students who are interested in enrolling in our B-Mitzvah Prep Course should contact Rabbi Rachel Barenblat at rabbi@cbiberkshires.com; a separate fee for this course will be assessed.

☐ **YES**, I'll add a contribution to support Jewish learning for those experiencing financial hardship. **$** _____

Grand Total *(Amount Enclosed)***: $** _____

NOTE: No child will be turned away from our programs due to financial hardship. CBI is committed to assuring a Jewish education for all of our children — scholarships are available for those who cannot afford full tuition. Those with concerns about the cost of these programs may speak in confidence with Rabbi Rachel Barenblat (rabbi@cbiberkshires.com) &/or Michael Smith (treasurer@cbiberkshires.com) prior to the start of the school year.

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Congregation Beth Israel, 53 Lois Street, North Adams, MA 01247

Jewish Journeys 2024–25 | Elective Enrollment Form
For 3rd through 7th Graders

Please fill out one form for each child you wish to enroll. We will do our best to accommodate students' first choices for electives, however we cannot guarantee enrollment in every student's first choice.

Students enrolling for the **_FULL YEAR_** will select 2 Jewish Studies elective classes (1 per semester) & will participate in 2 non-elective, level-based Hebrew classes, totaling 4 classes for the full year.

Students enrolling **_PER ELECTIVE_** may select 1 Jewish Studies elective class & 1 Hebrew class per semester. Please note that students are required to complete the first semester Hebrew class in order to register for the second semester Hebrew class.

Student's Name: _____

First Semester	Second Semester
(September 9 – December 9, 2024)	*(January 6 – May 5, 2025)*
Save the date for student presentations! ***JEWISH JOURNEYS SHABBAT*** ***Saturday, December 14, 2024** at **10am***	*Save the date for student presentations!* ***JEWISH JOURNEYS SHABBAT*** ***Saturday, May 10, 2025** at **10am***

HEBREW

☐ Hebrew Foundations 1

HEBREW

☐ Hebrew Foundations 2
(Prerequisite: Hebrew Foundations 1)

JEWISH STUDIES
(Choose 1)

☐ Tikkun Olam Workshop

☐ Handmade Judaism

*If selected class is **full**, enroll in other class:*

☐ Yes   ☐ No

JEWISH STUDIES
(Choose 1)

☐ Cooking Jewish Cultures

☐ Living Jewish Civilizations

*If selected class is **full**, enroll in other class:*

☐ Yes   ☐ No

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