

JOLIET JEWISH CONGREGATION  
Religious School Registration

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Grade Last Year: \_\_\_\_\_

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Grade Last Year: \_\_\_\_\_

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Grade Last Year: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Food Allergies (Identify Child): \_\_\_\_\_

Emergency Notification: \_\_\_\_\_ Phone #: \_\_\_\_\_

Religious School Fees - Members      1<sup>st</sup> Child fee & supplies \$150 \_\_\_\_\_

2<sup>nd</sup> Child fee & supplies \$125 \_\_\_\_\_

3<sup>rd</sup> Child fee & supplies \$125 \_\_\_\_\_

Religious School Fees - Non-Members      1<sup>st</sup> Child fee & supplies \$525 \_\_\_\_\_

2<sup>nd</sup> Child fee & supplies \$350 \_\_\_\_\_

3<sup>rd</sup> Child fee & supplies \$350 \_\_\_\_\_

Total Enclosed \_\_\_\_\_

Please make checks payable to Joliet Jewish Congregation