

**TEMPLE ISAIAH RELIGIOUS SCHOOL  
12200 SCAGGSVILLE ROAD  
FULTON, MARYLAND 20759**

**REGISTRATION INFORMATION 2011-2012**

The Temple Isaiah Religious School registration for 2011 - 2012 is now under way. Registration for students currently enrolled should be completed by May 31, 2011 in order to assist TIRS in planning for the fall. A non-refundable initial fee of \$75 is charged for each student in kindergarten through 12th grade registering at the Temple Isaiah Religious School.

This packet contains: registration information, tuition rates, projected class schedules, and information regarding DorV' Dor, the tutorial program, a four year old program, Confirmation and the B'nai Mitzvah track. If you have any questions, feel free to call the school office at 301-498-0200.

**WALK-IN REGISTRATION**

We will hold walk-in registration on **Sunday, May 1 from 9:00AM to 12:30PM, Monday, May 2 from 9:00AM to 2:00PM and Sunday, May 15 from 9:00AM to 12:30PM and Monday** at Temple Isaiah. At that time, we will process your registration application as well as answer any questions that you may have regarding Temple Isaiah Religious School.

**CLASS SCHEDULE, LOCATIONS AND TIMES**

Kindergarten will meet Sunday from 9:00 to 11:00AM

Beresheet (Age 4) and Grades one, two and three will meet on Sunday from 11:15AM-1:00PM.

Grades eight, nine and Confirmation will be from Sunday 9:00 to 11:00AM.

Grades four, five, six and seven will be from Sunday 9:00AM to 1:00PM.

Dor V'Dor (11-12th grade) will meet bi-monthly on Tuesday between 5:30 and 7:00pm.

**TEXTBOOKS**

**Parents are required to purchase textbooks.** Textbooks may be pre-ordered for the 2011-2012 school year. Please complete the enclosed form and return it with a separate check with your registration. Books will be waiting for your child in his/her class on the first day of school. In order to participate in textbook pre-order your child's registration must be received by June 30<sup>th</sup>. A book sale will be held at the Temple prior to the beginning of the school year. *The Torah Commentary*, tefillah packet, Hebrew CD and *Shalom Uvrachah: The New Hebrew Primer* will be used multiple years.

**HANDBOOK**

If you are a new family to TIRS, a handbook describing the policies of Temple Isaiah Religious School will be sent to you during the summer. The policies discussed will include, but are not limited to, snow cancellation, discipline, health, withdrawal from school, and tuition adjustment.

**TUTORIAL PROGRAM**

This program is geared for students age 8 and up who need individual instruction in Hebrew. The teacher and the Educational Director in consultation with the parents will evaluate students for placement.

## **BERESHEET PROGRAM-FOR FOUR YEAR OLDS**

This class will meet twice a month. Jewish holidays, customs and traditions will be explored through cooking, art, music and story experiences with the children. To enroll in this class, a child must be 4 by September 1, 2011.

## **CONFIRMATION**

The Confirmation program is an educational requirement for Temple Isaiah's 10th grade students. The class meets from 9:00AM to 11:00AM Sunday morning at Temple Isaiah. Through a variety of activities and presentations, each session encourages students to grapple with issues of Jewish identity in a changing world.

**\*There is an additional and separate Confirmation Fee of \$230 which will be billed separately and is due by January 1, 2012.**

## **DOR V'DOR - 11TH/12TH GRADE CLASS**

This class will meet twice a month on Tuesday evenings. Discussions will be about relevant issues that students are dealing with, including: Tikkun Olam, environment, abortion, relationship between church and state, Jews and politics, and Israel - Diaspora relations.

## **BAR/BAT MITZVAH POLICY**

To become a Bar/Bat Mitzvah at Temple Isaiah, a student must begin Jewish education at the Temple Isaiah Religious School no later than third grade and the student's family must affiliate with Temple Isaiah by the time the student is in 3<sup>rd</sup> grade.

## **FAMILIES AFFILIATED WITH ANOTHER SYNAGOGUE OR NOT AFFILIATED WITH A SYNAGOGUE**

Families who are not members of a synagogue or who are members of another synagogue are welcome to enroll their children at the Temple Isaiah Religious School.

## **FINANCIAL ASSISTANCE**

A limited amount of money is available for scholarships. These funds are awarded on the basis of need and the TIRS Scholarship Committee handles all applications in strict confidentiality. Any family seeking assistance should request an application from the Temple Isaiah Religious School immediately.

## **E-MAIL POLICY**

**We are strongly requesting a family e-mail address on the registration application.** For those who provide an e-mail address, we will send all school information via e-mail on a

weekly basis. Written notices will be mailed or carried home when appropriate.

## TUITION SCHEDULE

Courses	TI Member	Not Affiliated W/TI	
Beresheet-four year old	\$276	\$399	
<b>Primary (K-3) 2 hrs per week</b>	<b>\$543</b>	<b>\$858</b>	
<b>Middle School Program (Grades 4-7)</b> <b>2 hrs Hebrew &amp; 2 hrs Judaic/week</b>	<b>\$894</b>		<b>\$1215</b>
<b>High School Judaic (Grades 8-9)</b>	<b>\$603</b>	<b>\$918</b>	
<b>Confirmation</b>	<b>\$603</b>	<b>na</b>	
<b>Dor V'Dor-11<sup>th</sup>-12<sup>th</sup> Grade Class</b>	<b>\$294</b>	<b>\$429</b>	

## PAYMENT PLANS, POLICIES, AND DISCOUNTS

### Payment plan:

- Minimum of 1/3 of total tuition due by **July 31, 2011**
- Minimum of 2/3 of total tuition due by **October 31, 2011**
- Payment in full by **January 31, 2012**
- Discount for payment in full at registration

Any family whose total bill (tuition & fees) is more than \$2,000 may take a 5% discount on TUITION ONLY, not to reduce the total bill below \$2000. Registration fees may not be discounted. ***Discount for large bills may not be combined with discount for payment in full.***

### Discounts for Payment in Full:

Any family who pays in full for total tuition and registration fee at the time of registration may take a three percent (3.0%) discount on TUITION ONLY, to a maximum discount of \$55 per family. Registration fees may not be discounted. ***Discount for payment in full may not be combined with large bill discount.***

### Policies:

**1. Families will not be allowed to register for the 2011-2012 school year if their 2010-2011 financial obligations to TI and TIRS are not fully paid or if satisfactory arrangements have not been made with the Temple Administrator Fryda Fraeme at 301-317-1101.**

**2. Any SPECIAL PAYMENT SCHEDULE must be worked out and approved IN ADVANCE in writing through the Temple Administrator, Fryda Fraeme.**

**3. Any class/course with fewer than 12 students may be canceled at the discretion of the Temple Isaiah Religious School Committee. In such an event, if it is the only class being applied for and a second choice is not possible, the \$75 registration fee will be refunded.**

**4. Bills will be due and payable according to the above schedule. Your child's enrollment may be terminated if payment is not made promptly according to this schedule.**

**REGISTRATION APPLICATION FOR TEMPLE ISAIAH RELIGIOUS SCHOOL 2011 2012**

Please complete and return this form with your check for \$75.00 per student. Checks must be made out to Temple Isaiah Religious School. A late fee of \$55 will be charged to returning families who register after June 30<sup>th</sup>.

(PLEASE PRINT OR TYPE)

**FAMILY INFORMATION**

PARENT'S NAME	OFFICE PHONE NO.	OCCUPATION
PARENT'S RELIGION	CELL PHONE NO.	
ADDRESS	HOME PHONE NO.	NEIGHBORHOOD
PARENT'S NAME	OFFICE PHONE NO.	OCCUPATION
PARENT'S RELIGION	CELL PHONE NO.	
ADDRESS (If different from above)	HOME PHONE NO.	NEIGHBORHOOD
CONGREGATIONAL AFFILIATION		E-MAIL ADDRESS (for school communication)

**CHILD A**

NAME	HEBREW NAME	DATE OF BIRTH
PUBLIC SCHOOL	CHILD LIVES WITH ___ BOTH PARENTS	PRIOR RELIGIOUS EDUCATION
ENTERING GRADE:		
LEARNING PROBLEMS/MEDICAL PROBLEMS OR SPECIAL REQUESTS - Use reverse side for additional space		

**CHILD B**

NAME	HEBREW NAME	DATE OF BIRTH
PUBLIC SCHOOL	CHILD LIVES WITH ___ BOTH PARENTS	PRIOR RELIGIOUS EDUCATION
ENTERING GRADE:		
LEARNING PROBLEMS/MEDICAL PROBLEMS OR SPECIAL REQUESTS - Use reverse side for additional space		

**CHILD C**

NAME	HEBREW NAME	DATE OF BIRTH
PUBLIC SCHOOL	CHILD LIVES WITH ___ BOTH PARENTS	PRIOR RELIGIOUS EDUCATION
ENTERING GRADE:		
LEARNING PROBLEMS/MEDICAL PROBLEMS OR SPECIAL REQUESTS -Use reverse side for additional space		

**CHILD D**

NAME	HEBREW NAME	DATE OF BIRTH
PUBLIC SCHOOL	CHILD LIVES WITH ___ BOTH PARENTS	PRIOR RELIGIOUS EDUCATION
ENTERING GRADE:		
LEARNING PROBLEMS/MEDICAL PROBLEMS OR SPECIAL REQUESTS - Use reverse side for additional space		

**PLEASE COMPLETE:**

**PLEASE WRITE HERE WHO BILLS SHOULD BE SENT TO RATHER THAN PARENTS \_\_\_\_\_**

**PLEASE NOTE A REGISTRATION FEE OF \$75.00 PER CHILD IS REQUIRED.**

**DATE \_\_\_\_\_ CHECK # \_\_\_\_\_ PAYMENT \_\_\_\_\_**

I WISH TO REGISTER MY CHILD(REN) IN THE TEMPLE ISAIAH RELIGIOUS SCHOOL FOR THE 2011-2012 SCHOOL YEAR. I ENCLOSE A NON-REFUNDABLE INITIAL FEE OF **\$75.00** PER CHILD. I AGREE TO PAY THE TOTAL OBLIGATION AS INDICATED UNDER "BILLING INFORMATION" UNLESS OTHER ARRANGEMENTS ARE MADE.

\_\_\_\_\_  
PARENT'S SIGNATURE                      DATE

CHILD A GRADE \_\_\_\_\_ TUITION \_\_\_\_\_  
REGISTRATION \_\_\_\_\_

CHILD B GRADE \_\_\_\_\_ TUITION \_\_\_\_\_  
REGISTRATION \_\_\_\_\_

CHILD C GRADE \_\_\_\_\_ TUITION \_\_\_\_\_  
REGISTRATION \_\_\_\_\_

CHILD D GRADE \_\_\_\_\_ TUITION \_\_\_\_\_  
REGISTRATION \_\_\_\_\_

TOTAL TUITION \_\_\_\_\_

TOTAL REGISTRATION \_\_\_\_\_

**FOR OFFICE ONLY**

**TUITION**

\_\_\_\_\_

**MINUS 5% LG. BILL DISCOUNT  
OR 3% PAID IN FULL**

**5%**  \_\_\_\_\_

**3%**  \_\_\_\_\_

**LATE FEE** \_\_\_\_\_

**AMOUNT DUE** \_\_\_\_\_ **\$**

**PLUS REGISTRATION** **\$**

**TOTAL DUE** \_\_\_\_\_ **\$**

**PAYMENT**

**\$** \_\_\_\_\_

**NET AMOUNT DUE**

**\$** \_\_\_\_\_

**TEMPLE ISAIAH RELIGIOUS SCHOOL**  
**Emergency Procedure Card**  
**2011-2012**

Student A: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Student B: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Student C: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Student D: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Student(s)' Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

In case of emergency, illness, or accident, the school is authorized to contact the parents or neighbors in the order indicated below. Major emergencies will be taken to the nearest hospital.

First Parent \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ /C: \_\_\_\_\_

Second Parent \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ /C: \_\_\_\_\_

First Neighbor \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ /C: \_\_\_\_\_

Second Neighbor \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ /C: \_\_\_\_\_

Student(s)' Physician \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_

OTHER PROCEDURES (E.G. Medical restrictions or activities)

PERTINENT HEALTH PROBLEMS (E.G. Allergies, required medications)

Permission is hereby granted to TIRS to take my children to whatever physician or hospital is closest and available for emergency care when neither parents nor emergency contacts listed above can be reached. I hereby authorize TIRS to release the above mentioned information to any person responsible for the care of my child while at TIRS.

\_\_\_\_\_ Date \_\_\_\_\_  
Signature of First Custodial Parent or Guardian

\_\_\_\_\_ Date \_\_\_\_\_  
Signature of Second Custodial Parent or Guardian

**TEMPLE ISAIAH RELIGIOUS SCHOOL**  
**Emergency Procedure Card**  
**2011-2012**

Student A: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_

Student B: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_

Student C: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_

Student D: \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_

Student(s)' Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

In case of emergency, illness, or accident, the school is authorized to contact the parents or neighbors in the order indicated below. Major emergencies will be taken to the nearest hospital.

First Parent \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ / C: \_\_\_\_\_

Second Parent \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ / C: \_\_\_\_\_

First Neighbor \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ / C: \_\_\_\_\_

Second Neighbor \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_ / C: \_\_\_\_\_

Student(s)' Physician \_\_\_\_\_ Phone H: \_\_\_\_\_ / W: \_\_\_\_\_

OTHER PROCEDURES (E.G. Medical restrictions or activities)

PERTINENT HEALTH PROBLEMS (E.G. Allergies, required medications)

Permission is hereby granted to TIRS to take my children to whatever physician or hospital is closest and available for emergency care when neither parents nor emergency contacts listed above can be reached. I hereby authorize TIRS to release the above mentioned information to any person responsible for the care of my child while at TIRS.

\_\_\_\_\_  
Signature of First Custodial Parent or Guardian Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Second Custodial Parent or Guardian Date \_\_\_\_\_