2017-18 KEHILLAH HIGH

Registration Form

STUDENT INFORMATION

Student Name: First       Last

Student Email:

Student Cell Phone      -     -

Date of Birth:       MM/       DD/      YYYY

School:

Grade as of Fall 2015

Synagogue Affiliation: [ ]   Yes [ ]  No

If yes, with which synagogue is your family affiliated?

BILLING INFORMATION

Parent 1 Name:  First       Last

Parent 1: Phone Number      -     -

Parent 1: Email

Parent 2 Name: First       Last

Parent 2: Phone Number      -     -

Parent 2: Email

Billing Address**:** Street Address

Address Line 2

City       State       Zip Code

PAYMENT INFORMATION

Tuition: $975 per year (20 class sessions/3 trimesters)

Please print out all forms and attach a check for $975 payable to: Miriam Browning Jewish Learning Center. In the subject line, write Kehillah High.

Mail to: Danielle Alexander, Director

 Kehillah High

 5600 N. Braeswood Blvd.

 Houston, TX 77096