



2009-2010 COMMUNITEN REGISTRATION

Please print legibly

TEEN INFORMATION

Name: _____ E-mail: _____
 Home address: _____ City, Zip: _____
 Home phone: _____ Cell phone: _____
 High School: _____ Grade in September 2009: _____

PARENT/GUARDIAN INFORMATION

Name (s): _____ Relationship to student: _____
 E-mail #1: _____ E-mail #2: _____
 Address (if different): _____
 Day phone: _____ Evening phone: _____
 Cell Phone: _____ Cell phone: _____
 Congregation: _____

I/WE AGREE TO PAY THE BOARD OF JEWISH EDUCATION FOR TUITION AS INDICATED BELOW

Tuition

- One \$500 payment by check
- One \$500 payment on my Visa or Master Card
- Two equal payments of \$250 on my Visa or Master Card on date of Registration and 10/1/08.
Please note: a \$5 administration fee will be added for each credit card payment.

Type of charge: Visa Master Card Charge Card# _____
 Expiration date: _____ Cardholder Name: _____
 Signature _____ Billing Address: _____

Please make your check payable to "THE BOARD OF JEWISH EDUCATION"
 Fax (847-291-7792) or mail your completed form and payment to
BJE CHICAGO, ATTN: LINDA KUPFER, 3320 DUNDEE ROAD, NORTHBROOK, IL 60062

If you need additional information about classes starting in fall 2009, contact
 Linda Kupfer, Communiten Director, 847-291-7788 (ext. 1307) or lindakupfer@bjechicago.org

SCHOLARSHIP FUND

Would you be interested in contributing to the BJE Communiten fund? Yes No
 I/We have enclosed \$ _____ as a tax-deductible contribution to BJE. *Thank you!*