

Family Name: \_\_\_\_\_

# Temple Emanu-El Kurn Religious School

## Tuition Fee Schedule for 5780 (2019-2020)

### REGISTRATION FEES - APPLIES TO EVERY STUDENT ENROLLING

EARLY BIRD REGISTRATION FEE IF PAID BY MAY 31, 2019

\$50 X NUMBER OF STUDENTS \_\_\_\_\_ = \$ \_\_\_\_\_

REGISTRATION FEE

\$150 X NUMBER OF STUDENTS \_\_\_\_\_ = \$ \_\_\_\_\_

BAR/BAT MITZVAH FEE

\$850 X NUMBER OF STUDENTS \_\_\_\_\_ = \$ \_\_\_\_\_

#### TUITION FOR FIRST STUDENT IN HOUSEHOLD

GRADE	TUITION	NUMBER OF STUDENTS	COLUMN A
10 <sup>TH</sup> -CONFIRMATION	\$300	_____	\$ _____
NINTH	\$250	_____	\$ _____
EIGHTH	\$550	_____	\$ _____
SEVENTH	\$550	_____	\$ _____
SIXTH	\$550	_____	\$ _____
FIFTH	\$550	_____	\$ _____
FOURTH	\$550	_____	\$ _____
THIRD	\$550	_____	\$ _____
SECOND	\$450	_____	\$ _____
FIRST	\$450	_____	\$ _____
KINDERGARTEN	\$450	_____	\$ _____
PRE-KINDERGARTEN	\$250	_____	\$ _____
TORAH TOTS	\$250	_____	\$ _____

#### DISCOUNTED RATES FOR ADDITIONAL STUDENTS

GRADE	TUITION	NUMBER OF STUDENTS	COLUMN B
10 <sup>TH</sup> -CONFIRMATION	\$250	_____	\$ _____
NINTH	\$200	_____	\$ _____
EIGHTH	\$525	_____	\$ _____
SEVENTH	\$525	_____	\$ _____
SIXTH	\$525	_____	\$ _____
FIFTH	\$525	_____	\$ _____
FOURTH	\$525	_____	\$ _____
THIRD	\$525	_____	\$ _____
SECOND	\$425	_____	\$ _____
FIRST	\$425	_____	\$ _____
KINDERGARTEN	\$425	_____	\$ _____
PRE-KINDERGARTEN	\$200	_____	\$ _____
TORAH TOTS	\$200	_____	\$ _____

Registration Fees	\$ _____
Student One (Column A)	+ \$ _____
Student Two (Column B)	+ \$ _____
Student Three (Column B)	+ \$ _____
Bar/Bat Mitzvah Fee	+ \$ _____
Donation for Kurn RS Scholarships	+ \$ _____
Donation for Madrichim Program	+ \$ _____
<b>TOTAL</b>	<b>= \$ _____</b>

### REGISTRATION FEE PAYMENT MUST ACCOMPANY THIS FORM

**NOTE:** If you need a scholarship application, please contact Abby Limmer at [alimmer@tetucson.org](mailto:alimmer@tetucson.org).  
If you have a student currently enrolled in the Strauss ECE and are members of Temple Emanu-El, your students, up through Grade 2, can attend for just \$36/year each.  
Speak with Abby Limmer for further information.

#### PLEASE LET US KNOW HOW YOU WOULD LIKE TO BE BILLED.

**AUTOMATIC BANK TRANSFERS/CREDIT CARDS WILL BE PROCESSED THE FIRST WEEK OF THE MONTH**  
If we have your information, please clarify Credit Card Name or Bank Name as we may have multiple types of billing for you.

Also, please elaborate on how we should bill you.

\_\_\_\_\_ Bill Registration Fee(s) now and then bill tuition later  
 \_\_\_\_\_ One payment-in-full      \_\_\_\_\_ Semi Annual Payments      \_\_\_\_\_ 10 Monthly Payments

If we do not have your information, please fill out the form below.

\_\_\_\_\_ I will make my own payments by check, credit card or cash.      \_\_\_\_\_ Credit Card  
 \_\_\_\_\_ Automatic Bank Transfer      Credit Card Number \_\_\_\_\_  
 Bank Name \_\_\_\_\_      Expiration Date \_\_\_\_\_  
 Bank Account Number \_\_\_\_\_      Security Code \_\_\_\_\_

**SIGNATURE (REQUIRED)** \_\_\_\_\_

**DATE** \_\_\_\_\_

**NOTE: ALL TUITION PAYMENTS ARE FINAL. UNUSUAL CIRCUMSTANCES WILL BE CONSIDERED ON AN INDIVIDUAL BASIS.**