GRATZ COLLEGE
ADULT JEWISH LEARNING
REGISTRATION FORM

Student ID#________________(office use only)

I am registering for the: □ Scholars Program □ Hebrew Program □ Yiddish Program

Please print. Thank you.

Date: ___________ Year: Email: __________________________

Name: ___________________________ *Birthdate: __________________________

First Last

Address: ___________________________ City: __________________________

State _____ Zip: _______ Home Phone: __________________________ Cell Phone: __________________________

Synagogue (if applicable): ___________________________ Ethnicity: (*required by Federal Dept. of Education.)

Please check one: o Hispanic or Latino o American Indian or Alaska Native o Asian o Black or African American

o White o Native Hawaiian or Other Pacific Islander o Unknown

Have you ever taken an Adult Education course at Gratz College? □ Yes □ No

If yes, which program? □ Melton □ Scholars □ Hebrew □ Yiddish □ Other: __________________________

Are you currently teaching in supplementary religious school? ______ If so, where?: __________________________

Course Selections - Pre-Registration and Payment are required for all courses.

<table>
<thead>
<tr>
<th>Course # (office use only)</th>
<th>Course Title</th>
<th>Teacher</th>
<th>Day</th>
<th>Time</th>
<th>Location</th>
<th>Tuition/Fee</th>
</tr>
</thead>
</table>

Total tuition for all classes $__________ *(All classes held subject to minimum enrollment)*

For all classes full payment is due upon registration. If cancellation is received before the course begins, tuition will be refunded.

For more information on:

Scholars Program contact Lori Cohen, Director of Adult Jewish Learning, 215-635-7300 x182 or lcohen@gratz.edu

Hebrew Courses contact Gili Bitan 215-635-7300 x136 or gbitan@gratz.edu

Yiddish Courses contact Rita Ratson, 215-635-7300 x177 or rratson@gratz.edu

Gratz College
7605 Old York Road
Melrose Park, PA 19027
215-635-7300

Adath Israel
250 N. Highland Avenue
Merion Station, PA 19066
610-934-1919

Lower Merion Synagogue
123 Old Lancaster Road
Bala Cynwyd, PA 19004
610-664-5626

Tiferit Beth Israel
1920 West Skippack Pike
Blue Bell, PA 19422
610-275-8797

To register by phone contact Hope Matles, 215-635-7300 x172 or Fax to: 215-635-7399

Mail form to: Gratz College/AJL, 7605 Old York Road, Melrose Park, PA 19027

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Student ID#________________(office use only) Total tuition $__________

Please register me for: □ Scholars Program □ Hebrew □ Yiddish

Payment Method: □ (Check payable to Gratz College) Check # ________ □ Visa □ Master Card □ Discover

Card# ___________________________ Expiration Date: ________ Security Code # ________

Name on Card: ___________________________ Signature: ___________________________ Today’s Date: ________