



**Kochavim**  
 כוכבים

After-school Hebrew immersion play-group for pre-school through 2<sup>nd</sup> grade



*Immersion in active fun and Hebrew language, art, music, stories, games, computers, yoga, drama—and more!*

Join our innovative, award-winning Hebrew immersion programs!

\*New\* East-side and West-side locations

AND automatic subsidies for first-time participants!



**HaMerkaz**



Portland Center for Hebrew Immersion

המרכז לשפת עברית בפורטלנד

For more information or to register contact:

Mel Berwin – 503.246.8831 – [mberwin@nevehshalom.org](mailto:mberwin@nevehshalom.org)



Kochavim & Notz'tzim are unique programs developed & launched at Neveh Shalom. Kochavim & Notz'tzim east-side programs are run collaboratively by Congregations Neveh Shalom & Shir Tikvah. We gratefully acknowledge funding from Covenant Foundation and a Community Impact Grant from the Jewish Federation of Greater Portland.



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## After-school Hebrew immersion play-group for pre-school through 2<sup>nd</sup> grade

### Registration Form 2011-12

**Family Information:**

Child's Name \_\_\_\_\_ M / F

Hebrew Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Entering Grade \_\_\_\_\_ Child's School \_\_\_\_\_ Synagogue Affiliation/s \_\_\_\_\_

Parent \_\_\_\_\_ Email \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

Address \_\_\_\_\_

Parent \_\_\_\_\_ Email \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

Address \_\_\_\_\_

**Name, phone, & relationship of emergency contact other than parents:**

\_\_\_\_\_

**Name & phone of persons other than parents allowed to pick up child from school:**

\_\_\_\_\_

**Allergies & Reaction** \_\_\_\_\_

**Name & phone of child's physician** \_\_\_\_\_

**Special learning/developmental/emotional needs (anything that will help your increase your child's success in a learning environment)** \_\_\_\_\_

I give my permission for Kochavim staff to take pictures of my child for use in Kochavim publicity Y / N

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_



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**Enrollment Information**

Child's Name: \_\_\_\_\_

- We are a returning Kochavim/Notz'tzim family
- We are a family NEW to Kochavim/Notz'tzim—please contact us about our 25% discount!

Please enroll my child in Kochavim:

- WEST (at Congregation Neveh Shalom, 2900 SW Peaceful Lane, Portland 97239)  
 Mondays & Wednesdays, 4:15- 5:45 p.m.
- My child is 3-4 years old, and I am registering for PreKochavim, Weds 4:15-5:45.

OR

- EAST (at Bridgeport, 621 NE 76<sup>th</sup> Ave, Portland, 97213)  
 Tuesdays & Thursdays, 4:15-5:45 p.m.
- I have a younger child and would be interested in a Notz'tzim program for 0-3s concurrent with Kochavim on Tues or Thurs afternoon.

Registration for Kochavim requires a non-refundable fee of two months tuition, which will be applied to the first and last month of fees for the program. The remaining 8 months of tuition will be due on the first of each month, October-May. Please write checks to: Neveh Shalom, memo line: Kochavim. (All checks and forms should come to Neveh Shalom regardless of desired program location.)

	Neveh/Shir Tikvah member	Neveh/Shir Tikvah non-member
Kochavim (East or West)	\$160/month	\$192/month
PreKochavim	\$80/month	\$96/month

- Please send me an application for financial aid.

Enclosed is my check for 2x monthly fee: Total \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Questions? Please contact Mel Berwin, [mberwin@nevehshalom.org](mailto:mberwin@nevehshalom.org) or 503.246.8831

