

## SHANA BET DECLARATION

Scan and email to: [tuition@levhatorah.org](mailto:tuition@levhatorah.org)

This is to certify that: \_\_\_\_\_ (Name) will, *BeEzrat Hashem*, be attending Yeshivat Lev HaTorah for the academic year beginning *August 27, 2020*. There is a **non-refundable registration fee of \$1,000 USD and tuition for the full year is 75,000 NIS; until Pesach: NIS 68,000; and one semester: NIS 50,000.**

**I. I commit to being a full participant in every aspect of the Yeshivat Lev HaTorah program.**

**II.** I have read and understood Yeshivat Lev HaTorah's Tuition policy and hereby agree to abide by the conditions detailed therein. I agree to make the necessary financial arrangements for the remaining balance of the applicable tuition amount by July 15, 2020 and understand that failure to do so may mean that my son will not be allowed to begin the program.

**III. I understand that gambling, drinking, smoking cigarettes, drug use and all other forms of substance abuse are strictly prohibited both inside and outside the Yeshiva.**

*Violation of this policy is grounds for immediate dismissal from the Yeshiva.*

**IV.** I hereby authorize the health insurance provider used by Yeshiva Lev HaTorah to share my son's medical information with the Yeshiva.

Parents' signature(s): \_\_\_\_\_ (Mother) Date signed: \_\_\_\_\_

\_\_\_\_\_ (Father) Date signed: \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

**Please Note: Your son's spot in the incoming Shana Bet class will be reserved upon receipt of the registration fee and this signed Declaration form.**