



Sinai Temple's **teen** program

Hang with friends while enjoying a latte or smoothie, and choose from a variety of awesome electives.



**Including:**

**AIPAC - Debate - Ethical Dilemmas - Jewish Values - Darfur - Guitar - Holocaust Studies - Conversational Hebrew - Israel - Cooking - IDF Training - and much more!**

**Also:**

**Fulfill community service requirements & work towards confirmation!**



**Starting October 25, 2009**

**A program for teens  
(8th-12th Grade)**

**Two Sundays Per Month**

**9:30 am - 12:30 pm**

**Contact us for more information:**

Phone: 310-481-3273

Fax: 310-943-5414

Email: [sihi@sinaitemple.org](mailto:sihi@sinaitemple.org)



## Schedule

**9:30 - 10:00 Latte/ Smoothie Cafe**

**10:00 - 11:00 Elective 1**

**11:00 - 11:30 Intermission**

**11:30 - 12:30 Elective 2**

**Students will have an opportunity to choose from different electives that will change three times throughout the year.**



## Location, Dates and Times

At Sinai Temple from 9:30am - 12:30pm  
on the following Sunday mornings:

2009

October 25

November 1, 22

December 6

December 13 - Community Service Day

2010

January 10, 24

February 7, 28

March 7 - Community Service Day

March 21

April 11, 25

May 2, 16



**Please mark these dates on your calendar!**

# Registration Forms and Fees

Please complete one registration form per student and return it with your check payable to **Sinai Temple (SiHi), 10400 Wilshire Blvd, Los Angeles, CA 90024**

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Student Email: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Secular School: \_\_\_\_\_

	<b>ON OR BEFORE 9/1/2009</b>			<b>AFTER 9/1/2009</b>		
	<b>Tuition</b>	<b>Security Fee</b>	<b>Total</b>	<b>Tuition</b>	<b>Security Fee</b>	<b>Total</b>
Sinai Temple Members:	\$650	+\$100	<b>\$750</b>	\$800	+\$100	<b>\$900</b>
Non-Temple Members:	\$895	+\$100	<b>\$995</b>	\$950	+\$100	<b>\$1050</b>

There are no refunds.

## Signature Release

For field trips, excursions, health care responsibility and publicity.

My son/daughter has elected to participate in SiHi. I hereby assume all risk of any kind of injury or damage he/she may receive or sustain as a result of his/her participation in this/these activity(s). I authorize the Religious School Director and/or Rabbi of Sinai Temple or his/her authorized agent to consent to any emergency medical treatment and/or hospital care which is rendered to the minor named above, under the supervision of any licensed physician or trained medical responder. I hereby completely release and hold harmless and forever discharge Sinai Temple, and their officers, employees, representatives, agents and volunteers from liability or responsibility for any and all claims, damages, injuries, losses or cause of action that may result from or arise out of his/her participation in SiHi. I grant permission for the above named minor to participate in all youth activities, and for photographs include the above named minor to be used for marketing purposes unless otherwise indicated in writing.

Parent/Guardian Signature: \_\_\_\_\_

SiHi at Sinai Temple  
10400 Wilshire Boulevard  
Los Angeles, CA 90024

