

DECLARATION

Mail to:

**Yeshivat Lev HaTorah
c/o Mrs. Beth White
65 Argyll Avenue
New Rochelle, NY 10804**

This is to certify that:

(Name) _____

will, *BeEzrat Hashem*, be attending Yeshivat Lev HaTorah for the academic year beginning *September, 2011*.

Tuition for the year is \$17,000. The tuition cost for ½ year is \$10,000.

Registration Fee

____ Enclosed is a current check for \$1,000 (US).

(The \$1,000 non-refundable registration fee will be deducted from the tuition fee of \$10,000/\$17,000.)

I (we) understand that 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.*

I (we) have read and understood Yeshivat Lev HaTorah's Tuition policy and hereby agree to abide by the conditions detailed therein.

Parents' signature(s) _____

Student's signature _____

Address _____

Phone number _____

Parents' Email Addresses _____

Date _____

Please Note: **Your spot in the incoming Shana Bet class will be reserved upon acceptance of the registration fee and signed Declaration form by our US office.**