

**Berkeley Russian School
East Bay Russian Cultural Center
Enrollment Agreement**

Child's Name _____ Home Phone _____

Child's Age ___ Sex ___ Birth date _____ Grade September 2009 _____

Name of Regular School _____

Interests / Activities _____

Please describe any allergies or special problems _____

Name of sibling(s) who will attend Russian School _____

Mailing Address _____

Mother's Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Mother's Occupation _____

Father's Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Father's Occupation _____

Parent's E-mail Address _____

To which program are you applying?

Saturday Groups

Wednesday Groups

We the parent's who have signed below agree to pay tuition of _____ for the semester and the book and supplies fee, which is **\$80** for one semester.

Signature of Parent or Guardian _____ Date _____

Yelena Glikman _____ Date _____

Executive Director of EBRCC
Non-Profit ID # 94-3291149