

Visit ISRAEL



Dream of sending your child to Israel? Worried it will be too expensive? **WE CAN HELP!**

A trip to Israel is not only a fun and exciting experience for your child; it is also a unique way to get him or her connected with our Jewish heritage.

Young people who have participated in an Israel experience regard their time in Israel as one of the most positive Jewish moments of their lives.

The Jewish Federation of the Lehigh Valley's VISIT program is a saving partnership that helps diffuse the costs of your child's trip to Israel.



Who can enroll in the VISIT Israel Savings Partnership?

As a contributor to the Jewish Federation of the Lehigh Valley, you may enroll your children in the VISIT Israel Savings Partnership at any age. To qualify for a JFLV matching grant, the child must reside in the Lehigh Valley.

When is a student eligible for an approved Israel program?

VISIT participants may use their funds from the summer after 9th grade until they are 25 years old.

How does a Family contribute to the Visit Israel Savings Partnership?

A family deposits a minimum of \$300 per calendar year in the name of each child enrolled in the VISIT Israel Savings Partnership. Families are welcome to deposit unlimited funds. Family contributions may be made in any calendar year up to the year prior to the child's trip to Israel.

How does the Federation contribute to the VISIT Israel Savings Partnership?

The Jewish Federation of the Lehigh Valley adds \$200 per calendar year to the \$300 family contribution, for a **maximum of eight years**. Accrued interest is also added into the funds available for each child's trip.

Which Israel programs are approved for the VISIT Israel Savings Partnership?

The VISIT program is designed to fund Israel programs that emphasize Jewish learning or living experiences for a period of at least four weeks in Israel. There are over 75 that are recognized by national, local or regional Jewish organizations, such as Alexander Muss High School in Israel, USY, BBYO, NCSY, NIFTY etc. For more information about approved programs, visit www.jewishlehighvalley.org.



"VISIT was a no-brainer for us. We saw our niece and nephew after their peer trip to Israel and what it gave them in shaping their personalities and helping them grow besides the Jewish identity piece. We said 'let's start saving now.'" - Cheryl Figlin-Brenner, parent

"The VISIT program helped me to go on a program called Yad b'Yad. This is a trip to Israel for high schoolers and adults with special needs. As a 15 year old, it was a great way to tour the country and get to know some great people on a deeper level than I ever would have otherwise. The trip helped me form positive relationships with other Jewish teenagers my age while having fun and doing something important. I realized that summer that Israel is so special and unique because it can bring together Jews from all backgrounds." - Ayelet Notis, participant

Enrolling in the VISIT Israel Savings Partnership

Fill out a participation agreement and send it in to the JFLV at 702 N. 22nd Street Allentown, PA 18104 with a check for \$300 made out to Firsttrust Bank. This will establish a VISIT account in your child's name. You may enroll your grandchildren, if they reside in the Lehigh Valley.



Jewish Federation
OF THE LEHIGH VALLEY

www.jewishlehighvalley.org



Participation Agreement

The parties to this agreement _____ (Parent/Guardian - PLEASE PRINT) _____, and the Jewish Federation of the Lehigh Valley agree to participate in the VISIT Israel Savings Partnership.

The terms and rules controlling the parties' participation in this program are defined in the attached separate document entitled "VISIT Israel Savings Partnership Rules of Participation" (hereinafter referred to as "Rules of Participation"). The parties of this agreement state that they have read the separate document known as the "Rules of Participation" and have agreed to participate in this program according to its terms.

The parties acknowledge their participation in the program by signing and dating the agreement below.

Registration Form

Parent/Guardian _____

Street Address _____

City _____ State _____ Zip Code _____

Participant's Name _____ Birthdate _____

Address (if different than above) _____ Phone _____

_____ Zip _____ SSN _____

School _____ Class of 20 _____

E-mail Address _____

Synagogue Affiliation _____

Signature of Parent/Guardian _____ Date _____

Please make all checks payable to FIRSTRUST BANK and return this form, along with your check, to the JFLV office
702 N. 22nd Street, Allentown, PA 18104 | 610-821-5500 | 610-821-8946 FAX



Jewish Federation

OF THE LEHIGH VALLEY



ABBY TRACHTMAN

Project Coordinator

610.821.5500 | abbyt@jflv.org

www.jewishlehighvalley.org/visitisrael.aspx

