
Temple Adath Religious School 2011-2012 Registration Form

Child's Name _____ Hebrew Name _____

Date of Birth _____ email address _____

Child's Address _____

Secular School _____ Grade _____

Childs hobbies, sports, or interests _____

Siblings and Dates of Birth _____

PARENT CONTACT INFORMATION

Mother's Name _____ Home Phone _____

Mother's Address (if different from child's) _____

Work Phone _____ Cell Phone _____

Mother's e-mail address _____

Father's Name _____ Home Phone _____

Father's Address (if different) _____

Work Phone _____ Cell Phone _____

Father's e-mail address _____

Child lives with: _____

Please indicate child's previous religious education:

School/Jewish Camp/Youth Group _____

Years _____

Is there anything special that we should know about your child with regard to:

Special learning needs/situations? _____

Health concerns (including allergies, medications, etc.)? _____

Other _____

Please feel free to contact Devorah Lowenstein at 445-0002 ext. 111 to discuss any concerns you may have.

In case school needs to be closed during the day for any reason, what is the best phone number at which to reach you?

Phone _____

Does your child come by bus on Wednesdays? Yes No School District _____

In case of emergency, please list two people we can contact *if parent or guardian is NOT accessible*.

1. Name _____ Phone _____

Address _____

2. Name _____ Phone _____

Address _____

Tuition: A \$75 fee per child is required with this form. The amount will be deducted from your tuition bill.

		<u>Members</u>	<u>Non-Members</u>
	<i>(Please check one)</i>		
Grades K - 1	(Sunday Only)	\$225 _____	\$450 _____
Grade 2 - 7	(Sun. & Wed.)	\$350 _____	\$725 _____

The Temple Adath Religious School is committed to make it possible for every child to attend whose family wishes him or her to receive a religious education here. Thus we have a policy to offer special consideration for pressing financial circumstances. Furthermore, the Religious School works in close cooperation with the membership committee of Temple Adath; together we work to make it possible and feasible for families to become members of Temple Adath.

I hereby give permission for pictures of my child, _____, to be used in Temple Adath Yeshurun publicity including the Temple Bulletin, newsletters and the Jewish Observer.

Parent's Signature _____

I hereby give permission for pictures of my child _____ to be used on the Temple Adath Yeshurun website. No names will be used for pictures on the website.

Parent's Signature _____

Field Trip Permission:

I hereby permit my child, _____ (grade _____), to participate under supervision in educational and/or recreational trips during the period of the school year 2011-2012. Such permission will remain in force until the expiry of such period unless terminated by me by express notice in writing to the principal of the above school.

Date _____ Signature of Parent/Guardian _____

NOTE: Parents will still be informed of the nature and detail of each excursion before the date of the trip. However, unless the school receives written notice to the contrary, the student will participate in the excursion.

If you don't want your name, address and phone number and email published on a class list, please check the box below.

Signature _____