

BETH ISRAEL RELIGIOUS SCHOOL REGISTRATION FORM

All school fees must be paid by December 31 of the current calendar year

Student Name: _____

Student Name: _____

Student Name: _____

Student's home address: _____

City: _____ State _____ Zip Code _____

Does student(s) live with both parents? Y N If Not, with whom does student reside? _____

Mother's Name: _____ Father's Name: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

E-Mail: _____ E-Mail: _____

Preferred method of contact (circle): Home Cell Email

In Case of Emergency and Parent(s) cannot be reached, please contact:

Name: _____ Relationship to Student: _____

Phone: _____ Alternate Phone: _____

Religious School Fees:

Member - \$200 Non-Member - \$380 addition material fees may be assessed if needed up to \$50 per student

At Beth Israel our goal is to best meet the needs and desires of our community. If offered, please indicate your likelihood to attend the following:

- Children's Services on Friday
- Family Services on Friday Night
- Children's Services on Saturday Morning
- Family Program Saturday afternoon
- Family Havdalah Saturday Night

Are you more likely to attend any of the above based on the times services are held? If so, please specify below:

Beth Israel Congregation Religious School Student Enrollment

Name of Student: _____ Grade: _____

Registration for: ____ Sunday School

Will this student celebrate their Bar/Bat Mitzvah this year? Yes No Date if known _____

Student Name: _____ Age: _____ DoB: ____/____/____

Hebrew Name: _____ Gender: Male Female

School Student Attends: _____ Grade _____

Special needs of Student: (use reverse of form as needed) _____

Does your student have a IEP at school: ? Yes No

Does your student have any pet peeves, triggers or dislikes the teacher should be aware of?

At Beth Israel Religious School we create our classes based on many factors including grade level, and the students relationships to each other. Are there any specific factors you think we should be aware of when determining which class this student should be in?

Previous Religious School experience or other Jewish education:

**Beth Israel Congregation Religious School
Medical Release Form**

Name of Student: _____

Grade: _____

In case of injury or illness of a student at school, every effort will be made to contact the parent and/or guardian. The following instructions will remain in force unless revoked by the parent and/or guardian.

In case of minor injury or illness, may we give your student first aid? Yes No

In case of serious injury, when or parent or guardian cannot be reached, do you wish your student's physician to be contacted? Yes No

Name of Physician: _____

Phone Number: _____

Allergies: _____

Does your student carry an Epi pen? Yes No

May we call an ambulance if necessary? Yes No

Please list, in order of preference, who should be contacted in case of any emergency. Be sure to include alternate numbers in case you cannot be reached.

Name	Phone	Alt Phone	Relationship

Please use the back of this form to list any existing conditions or special needs your child has. These may include vision and/or hearing difficulties, allergies, learning challenges.

In the event of a medical emergency, I authorize the staff of Beth Israel to obtain emergency treatment for my child. I understand that I will be contacted immediately.

Parent Name

Phone Number

Parent Name

Phone Number

Beth Israel Congregation Religious School
Drop off – Pick up Form

Name of Student: _____ Grade: _____

Parent Name: _____ Parent Name: _____

Are both parents allowed to pick up student? Yes No

List any other person allowed to pick up student:

_____	_____
_____	_____
_____	_____

School ends at 12:30 pm. We ask that they are picked up by 12:45 pm. Person to contact if student is not picked up on time and parent is unreachable:

_____	_____	_____
Name	Phone	Alternate Phone

**Beth Israel Congregation Religious School
Photo Release Form**

Subject (Name of Student): _____ Grade: _____

Location: Beth Israel religious school grounds and functions excluding services.

Permission to Use Photograph

I grant to Beth Israel Congregation and the ISJL, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize Beth Israel Congregation and ISJL, its assignees and transferees to copyrights, use and publish the same in print and/or electronically.

I agree that Beth Israel and the ISJL may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising and web content.

I have read and understand the above:

Signature

Printed name

Address

City, State, Zip

Date

Parent signature (if under 18)

Beth Israel Congregation Religious School Behrman House Permission Form

Our school uses the Behrman House Online Learning Center (OLC), a private and secure online educational platform that provides a safe way to support learning outside the classroom. We manage our own space in the OLC, and the only people who have access are those who have been authorized by our school. Using the OLC, students will be able to:

- Practice and review Hebrew or other material we have covered in class, using special lessons and games developed specifically for that purpose.
- Participate in class or group discussions at the option of, and monitored by, the teacher (students cannot send private messages to other students).
- View missed work when absent, and see school-wide messages about important events.

In order for your child to use the OLC, we must have your written permission using the form below. We will set up your child’s OLC account and enroll him or her into the appropriate classes. You can learn more about OLC by visiting www.behrmanhouse.com/olc.

Once your child is enrolled, he or she will be able to log in to the OLC from any computer with an internet connection. When your child logs in for the first time, he/she will be asked to review the Privacy Policy and the Terms of Use with you, and you will be asked to agree to them. In the future, if you receive notice that either of these have changed, please review them with your child again. You can access these materials at any time by clicking “Privacy Policy/Terms of Use” at the very bottom of any page at behrmanhouse.com.

Thank you for your support as we undertake this learning initiative.

I GIVE CONSENT FOR THE BELOW CHILD TO USE THE BEHRMAN HOUSE OLC

Student First Name: _____ Last Name: _____

Email Address: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Please note: If you have more than one child in our school, we will need a permission form for each student and each student will also need a separate and unique email address to be used for sign-up. Email addresses used for OLC sign up are kept private and used only for OLC and school-related purposes.