



Office notes: _____

**Beth Am Temple Religious School
2011-2012/5772 Registration Form**

Enrollment in Religious School is a privilege of Temple Membership. To register your child in the Religious School you must be a member in good standing. Continued attendance is contingent upon maintaining your membership in good standing throughout the duration of the school year.

Student's Name _____

Hebrew Name _____

Home Number	Primary Cell Number
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Student's Address:

Family Email Address:

Date of Birth ___/___/___ Grade (as of 9/2011) _____ Secular School District:

Health Information: Does your child have any allergies or medical issues? Please describe: ____

Please provide any information that we should be aware of (ex. Custody arrangements, special needs, etc.) _____

Learning Style: Please describe your child's learning style, including remedial help received in secular school, special abilities: _____

EMERGENCY INFORMATION:

We are a part-time school. There is no one who is insured to administer any medication.

Child's Physician _____ Phone _____

Every effort will be made to contact the parents. Should we be unsuccessful, please list those we should contact:

1.Name: _____ Phone: _____

Address: _____ Relationship: _____

2.Name: _____ Phone: _____

Address: _____ Relationship: _____

Mother's Name:	Father's Name:
Mother's Hebrew Name* *If not Jewish, write N/J	Father's Hebrew Name* *If not Jewish, write N/J
Home Number	Home Number
Work Number	Work Number
Cell Number	Cell Number

Beth Am Temple Religious School

60 E. Madison Avenue • PO Box 1200 • Pearl River, NY 10965

(845) 735-5858

Email Address	Email Address
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Please circle above preferred email address

_____ Please check here if your child did not register in Beth Am Religious School before Sept. 2011.

_____ Current teachers arrange next year's classes. However, please have your child list a friend or two. Your request must be reciprocal to be considered. There are no guarantees but we will do our best to accommodate any reasonable request.

_____ and _____

Siblings	DOB	Grade

_____ Please check here to sign up for **Va'ad Horim**, our Parent Committee, which organizes primarily by email/phone contact. We need parent volunteers as well as Class Parents to assist throughout the year with special activities including baking, field trips, and other fun events. (You'll be contacted with more information about ways you can assist with Religious School Activities.)

KITCHEN Release From time to time at Beth Am, students supervised by adults assist with cookie assembly, challah braiding, and other types of food preparation. Please check one of the following:

___ I give my permission to BAT Religious School for my child to participate in supervised kitchen activities.

___ I do not give my permission to BAT Religious School for my child to participate in supervised kitchen activities.

MEDIA Release From time to time we publicize our wonderful Religious School and synagogue in the local media including newspapers and television, in the Temple Bulletin, or in printed brochures to be sent out to prospective families. Please check one of the following:

_____ I give my permission to BAT Religious School to use photographs of my child to promote BAT.

_____ I do not give permission to BAT Religious School to use photographs of my child to promote BAT.

CONTACT Information for a school directory this year. Please check one of the following:

_____ I give permission to allow my child's contact information to be released to classmates

_____ I do not give permission to allow my child's contact information to be released to classmates

UPDATES to Enrollment Form

_____ I have reviewed, and as needed, updated the information in my child's enrollment form for the 2011-2012/5772 school year at Beth Am Temple Religious School.

Parent's signature _____ Date _____