

Religious School (Pre-K thru 10th grades) Registration Form 09-10

Please return with Tuition to RST Office no later than August 28, 2009 Tuition check # _____

Please indicate here if you need to discuss a payment plan for tuition. _____

Please enroll my child(ren):

Seventh Grade – Bar/Bat Mitzvah year

Child's Name (English) _____ (Hebrew) _____

Birth date _____ Grade _____

Does your child attend Hebrew School? yes no

If yes, what grade? _____

Does/did your child attend the Hebrew Academy? yes no

Are there any problems that affect your child's class behavior, performance, or participation of which the teacher should be aware? Please include specifics on any allergies.

Other Grades:

Child's Name (English) _____ (Hebrew) _____

Birth date _____ Grade _____

Does your child attend Hebrew School? yes no

If yes, what grade? _____

Does your child attend the Hebrew Academy? yes no

Are there any problems that affect your child's class behavior, performance, or participation of which the teacher should be aware? Please include specifics on any allergies.

Child's Name (English) _____ (Hebrew) _____

Birth date _____ Grade _____

Does your child attend Hebrew School? yes no

If yes, what grade? _____

Does your child attend the Hebrew Academy? yes no

Are there any problems that affect your child's class behavior, performance, or participation of which the teacher should be aware? Please include specifics on any allergies.

Father's Name (English) _____ (Hebrew) _____

Mother's Name (English) _____ (Hebrew) _____

Address _____

Phone: (Home) _____ (Cell) _____ (Other) _____

Parent Email Address _____

Please indicate here if you wish to **deny** permission to use photos of yourself and/or your children in synagogue-related activities. _____ Parent/Guardian signature and date