



2019-2020 (5780)

## Religious School Registration

Congregation Emanu-El of the City of New York

*To enroll in the Religious School of Congregation Emanu-El, the student's legal guardian must be a member of the congregation. For membership information, please contact the Membership Office at (212) 507-9514 or [membership@emanuelnyc.org](mailto:membership@emanuelnyc.org), or visit us at [www.emanuelnyc.org/membership](http://www.emanuelnyc.org/membership) to download an application.*

### GENERAL INFORMATION

*Please complete one registration form for each student. You may contact the Religious School office at [school@emanuelnyc.org](mailto:school@emanuelnyc.org) or (212) 507-9546 to have forms sent to you or download them from the Temple website ([www.emanuelnyc.org/RSforms](http://www.emanuelnyc.org/RSforms)). If you are registering a returning student, you may contact the Religious School office for an individualized form based on last year's registration information.*

Name of Student: \_\_\_\_\_ Nickname: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secular School: \_\_\_\_\_ Grade (2019-2020): \_\_\_\_\_

Student attended Religious School at Congregation Emanu-El in a prior year: \_\_\_Yes \_\_\_No

Name of Adult 1: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address (if different than above): \_\_\_\_\_  
Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Adult 2: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address (if different than above): \_\_\_\_\_  
Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If at a different address, does Adult 2 require duplicate mailings? \_\_\_Yes \_\_\_No

**EMERGENCY CONTACT INFORMATION**

*In case of emergency, Congregation Emanu-El will contact Adults 1 and 2 listed above. If there are additional Emergency Contacts, please provide the information here:*

Emergency Contact #1 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Best method(s) of contact: \_\_\_ Home Phone \_\_\_ Mobile Phone \_\_\_ Email \_\_\_ Other

Contact information: \_\_\_\_\_

Emergency Contact #2 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Best method(s) of contact: \_\_\_ Home Phone \_\_\_ Mobile Phone \_\_\_ Email \_\_\_ Other

Contact information: \_\_\_\_\_

**MEDICAL INFORMATION**

*Please remember to inform the Religious School office if there are changes in the student's health over the course of the year. All medical information is kept strictly confidential.*

In the event no one can be reached, I give permission for the staff of Congregation Emanu-El to take whatever emergency measures are necessary: \_\_\_ Yes \_\_\_ No

Is your child regularly on any medication? \_\_\_ Yes \_\_\_ No

If yes, please describe:

\_\_\_\_\_

School personnel are not permitted to administer medication to students; if your child will require the above medication during Religious School hours, please detail the method by which your child will receive this medication:

\_\_\_\_\_

Please describe any allergies or special medical conditions: \_\_\_\_\_

\_\_\_\_\_

Does your child carry an Epi Pen? \_\_\_ Yes\* \_\_\_ No

*\*A separate Allergy Information & Epi Pen Authorization Form will be sent to all families with a child who carries an Epi Pen.*

In the unlikely event of a medical emergency while your child is in school, please provide the following information:

Physician's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Sign here to indicate that all medical information is clear and accurate:** \_\_\_\_\_

## **STUDENT PLACEMENT INFORMATION**

Students in grades **PreK-6** attend one day a week, either on Sundays or Mondays. **Seventh graders** participate in Mitzvah Corps, attending learning and reflection sessions during school hours on Sundays or Mondays; action sessions meet according to a special calendar. **Eighth graders** participate in Tzedek League every other Wednesday (6-8PM). **Ninth and 10<sup>th</sup>** graders may register for Confirmation which takes place on select Sunday mornings (10:30AM-12PM). Full Religious School, Mitzvah Corps, Tzedek League and Confirmation calendars will be available in August.

Please register my child for Religious School as follows:

Sundays, 9:30 AM – 12 PM (PreK-7<sup>th</sup> grade)       Tzedek League (8<sup>th</sup> grade)  
 Mondays, 4 AM – 6 PM (PreK-7<sup>th</sup> grade)       High School Confirmation (9<sup>th</sup>-10<sup>th</sup> grade)

*To build classroom community, we endeavor to honor students' requests to be placed with friends.*

My child would prefer to be placed in the same class as one of the following students:

My child has prior knowledge of Hebrew:  Yes  No If yes, please describe: \_\_\_\_\_

If there are any special learning needs, issues or other concerns regarding your child that you would like to confidentially share with us, please check here: \_\_\_\_\_

A good time for you to be reached to discuss this matter is: \_\_\_\_\_

## **RELIGIOUS SCHOOL DISMISSAL INFORMATION**

*We are committed to ensuring the safety of our students at all times while at Congregation Emanu-El. No student will be allowed to leave Religious School unaccompanied by an adult, unless permission is given below.*

My child has my permission to leave Religious School unescorted at the end of the day.

My child is only allowed to leave Religious School escorted by an adult. In addition to Adult 1 & 2 indicated on Page 1 of this registration form, please let my child leave with the following adults:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

## **ADDITIONAL PROGRAMS FOR STUDENTS**

We are interested in learning more about the following programs occurring outside of school hours:

Online Hebrew Enrichment via Skype       Teen Philanthropic Committee (8<sup>th</sup>-12<sup>th</sup> grade)

Shofar Corps (PreK-7<sup>th</sup> grade)       Trip to New Orleans (8<sup>th</sup> grade)

Newspaper (3<sup>rd</sup>-7<sup>th</sup> grade)       Civil Rights Weekend (9<sup>th</sup> grade)

Student Council (4<sup>th</sup>-7<sup>th</sup> grade)       A-TEEM (High School Internship, 9<sup>th</sup>-12 grade)

Youth Group Events (5<sup>th</sup>-7<sup>th</sup> grade)       Family Israel Trip (December 2020)

## **ADULT VOLUNTEER OPPORTUNITIES**

Please contact me regarding the following volunteer opportunities for adults:

Volunteering in the Religious School       Volunteering at Family Programs  
(while your child is in school)      (outside of school hours)

Volunteering for Sunday Lunch Program       Tikkun Olam Committee/Mitzvah Day Activities

## **COMMUNICATIONS**

*We respect your right to privacy and therefore are requesting your permission for the following:*

If you **do not** want your name and contact information (address, home phone and email) included in the Religious School Parent/Student Directory, initial here: \_\_\_\_

It is our policy to not identify any students by name in Temple publicity. If you **do not** authorize Congregation Emanu-El to use photographs and recordings of your child on the Temple website, in print materials and other media for the promotion of and public education about our programs, initial here: \_\_\_\_

## **ADDITIONAL FAMILY INFORMATION**

*We'd like to learn a bit more information about your family.*

Student attended Temple Emanu-El's Nursery School: \_\_\_\_Yes \_\_\_\_No

Family participated in Temple Emanu-El's Young Families Group/Tot Shabbat: \_\_\_\_Yes \_\_\_\_No

Student attends the following summer camp: \_\_\_\_\_

Does your family have additional children who have never been registered for our Religious School? Yes:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Describe any skill, area of expertise or resource you or a member of your family could offer the Religious School community:

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## **SIGNATURE**

*By signing this form you are confirming that the above information is correct. Religious School fees for the 2019-2020 academic year are \$1675 per student. A \$100 discount per student will be issued to any family who **registers in full** by submitting a completed form and full tuition payment by **June 28, 2019**. To pay online by credit card, go to [www.emanuelnyc.org/payment](http://www.emanuelnyc.org/payment).*

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **RETURNING THE REGISTRATION FORM**

*Please return the completed form to the Religious School office by **June 28, 2019** to ensure that your child is placed in his or her first-choice class.*

### **Forms can be returned by mail:**

Religious School Office  
Congregation Emanu-El  
One East 65<sup>th</sup> Street, 4<sup>th</sup> Floor  
New York, NY 10065

### **By email:**

[school@emanuelnyc.org](mailto:school@emanuelnyc.org)

### **By fax:**

(212) 570-0826

For questions or to receive additional copies of this form by mail or email, please call the Religious School office at (212) 507-9546 or send an email to [school@emanuelnyc.org](mailto:school@emanuelnyc.org). Forms also can be downloaded from the Temple website at [www.emanuelnyc.org/RSforms](http://www.emanuelnyc.org/RSforms).