



2020-2021 (5781)  
**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. The information included below is based on our data from last year's registration information. Please verify that it is still accurate or update when necessary. Make sure to answer all questions and sign or initial in all required areas.*

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

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

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

Secular School: \_\_\_\_\_ Grade (2020-2021): \_\_\_\_\_

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

If you have a preferred contact person and/or method from the above information, please share here:

**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: \_\_\_\_\_

Please print your name here:

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

**STUDENT PLACEMENT INFORMATION**

*PreK-8 graders attend one day a week, either on Sundays or Mondays. Ninth graders participate in Confirmation on select Sunday mornings. Program calendars will be available in August.*

Please register my child for Religious School as follows:

Sundays, 9:30 AM – 12 PM (PreK-8<sup>th</sup> grade)       Mondays, 4 PM – 6 PM (PreK-8<sup>th</sup> grade)

High School Confirmation; Sundays, 10:30 AM – 12 PM (9<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:

Shofar Corps (PreK-8<sup>th</sup> grade)       One-on-One Online Hebrew Enrichment (3<sup>rd</sup>-6<sup>th</sup> grade)

Newspaper (3<sup>rd</sup>-7<sup>th</sup> grade)       Teen Philanthropic Committee (8<sup>th</sup>-12<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 (3<sup>rd</sup>-7<sup>th</sup> grade)

**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 would like to make you aware of the following:*

Congregation Emanu-El reserves the right to photograph and video participants in our programs, and make use of recordings of online programming, for use in public promotion or public education about our programs. It is our policy to not associate any images of students with their full name. If you have questions or concerns about this policy, contact the Religious School at (212) 507-9546 or school@emanuelnyc.org.

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: \_\_\_\_

**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:

\_\_\_\_\_

**SIGNATURE**

*By signing this form you are confirming that the above information is correct. Religious School fees for the 2020-2021 academic year are \$1775 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 30, 2020**. 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 30, 2020** 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)

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).