Religious School Registration Form
2018-2019
Beth El Congregation

Please fill out a separate form for **each student** in the family.

Full name of student _____
First Middle Last

Birth Date _____

Hebrew name_____ben/bat_____-v'_____
*if applicable *father's *mother's

Street address_____

Parent's name (s) _____

Phone numbers: Land _____Cell _____

Email Address: _____

Grade last attended _____ New student at Beth El? Yes____ No ____

Someone to contact if we can't reach you_____Ph.#_____

How do you prefer to be contacted in case of school closing?
_____ text _____ email _____ phone call at this number _____

Does this child have any physical condition, allergies, or other circumstances of which we should be aware? Please give sufficient detail to be helpful. Use back of sheet if necessary.

Can you describe his or her qualities as a student, and what learning style works best with him/her (Oral, visual, experimental are some options).

NOTE: The registration fee for 2018-2019 year is set at $100 for the first child, $75 for the second and $50 for each additional child and must be paid if full on the first day of class which is September 16th. You must also be a member in good standing on that date, meaning that ¼ (one fourth) of your total year's dues commitment is paid before the child can register. Please direct all financial questions to the treasurer, Jay Viner.