

**TEMPLE EMANUEL RELIGIOUS SCHOOL**  
1101 Springdale Road, Cherry Hill, NJ 08003 856-489-0035  
2007-2008 GENERAL REGISTRATION FORM

**PLEASE COMPLETE A SEPARATE FORM FOR EACH CHILD ENROLLING.**  
**Please return by June 30, 2007.**

Student's

Name \_\_\_\_\_  
Last First Middle Hebrew Name

Address \_\_\_\_\_  
Street City State Zip Code

Home Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Month/Day/Year

Family's e-mail address \_\_\_\_\_ Child's e-mail address \_\_\_\_\_

Is this your child's first year at Temple Emanuel's Religious School? Yes \_\_\_\_\_ No \_\_\_\_\_

Can we publish your address and phone number for class lists? Yes \_\_\_\_\_ No \_\_\_\_\_

Can we use your child's picture in newsletter articles and publicity? Yes \_\_\_\_\_ No \_\_\_\_\_

Would you like to volunteer as a Class Parent? Yes \_\_\_\_\_ No \_\_\_\_\_

Name of public/private school \_\_\_\_\_ Grade as of September 2007 \_\_\_\_\_

Parent 1 Name \_\_\_\_\_  
Dr./Mr./Mrs./Ms. First Middle Last

Address \_\_\_\_\_  
Telephone Numbers – Day \_\_\_\_\_ Evening \_\_\_\_\_  
Cell Phone # \_\_\_\_\_ Beeper # \_\_\_\_\_

Parent 2 Name \_\_\_\_\_  
Dr./Mr./Mrs./Ms. First Middle Last

Address \_\_\_\_\_  
Telephone Numbers – Day \_\_\_\_\_ Evening \_\_\_\_\_  
Cell Phone # \_\_\_\_\_ Beeper # \_\_\_\_\_

Child lives with Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

In case of emergency, please contact (other than parent):

\_\_\_\_\_  
Name phone # relationship to child  
Doctor's name & telephone Number:

\_\_\_\_\_  
In case of emergency, I hereby authorize (by my signature on this application) the Director of Education, Rabbi or teacher to call my physician or to take my child to the nearest hospital to receive appropriate emergency treatment. Please attach a photocopy of your child's health insurance card, both front & back sides. Please initial: \_\_\_\_\_

**PLEASE COMPLETE QUESTIONS ON REVERSE SIDE**

For office use only  
Date Received:

Please respond to the questions below. All information will remain confidential.

Are there medical concerns (i.e. allergies, medications, visual problems, frequent need to use bathroom, nosebleeds, chronic illness, etc.) of which the school should be aware?

Does your child have any learning considerations in reading, writing, comprehension, organization, speech/language, attention, etc. of which the school should be aware?

What special services, if any, does your child receive in secular school or privately?

The Religious School office must be notified in writing if there are custody issues and/or are any persons **unauthorized** to pick up your child/ren (early dismissal only).

**Signature of Parent:** \_\_\_\_\_ **Date** \_\_\_\_\_

Please complete the chart below for students in Pre-School Sundays & K through 6<sup>th</sup> Grade ONLY  
Information for all other grades and programs can be found on the instruction sheet.

**If you are unsure of your preference for session or days, please return the form with your best prediction of session choice. You can change at a later date.**

Grade	Sunday Session	
	I 9:00 – 11:00 AM	II 10:30 – 12:30 PM
Pre-School Sundays 1 morning/month		<b>Not Offered</b>
K		
1		
2		
3		
4		
5		
6		
	Hebrew School	
2 <sup>nd</sup> Grade (Head Start Hebrew)	Tuesday 4:15-6:15 PM	Wednesday 4:15-6:15 PM
2 <sup>nd</sup> Grade Parent-Child Hebrew	Not Offered	Wednesday 6:30-8:00 PM
3 <sup>rd</sup> Grade (Aleph)	Tuesday 4:15-6:15 PM	Wednesday 4:15-6:15 PM
3 <sup>rd</sup> Grade Parent-Child Hebrew	Not Offered	Wednesday 6:30-8:00 PM
4 <sup>th</sup> Grade (Bet)	Tuesday 4:15-6:15 PM	Wednesday 4:15-6:15 PM
5 <sup>th</sup> Grade (Gimel)	Tuesday 4:15-6:15 PM	Wednesday 4:15-6:15 PM

**Parent- Child Hebrew**

If registering for Parent Child Hebrew, the same parent must attend each session with the child. Name of the parent registering:

**Placement Requests**

Each student may request to be placed with up to 2 friends for Judaica classes only. These requests must be mutual to be fulfilled. We will do our best to fulfill these requests. Requests made on forms returned by the June 30 deadline will be given first priority.

Please place my child with 1. \_\_\_\_\_ 2. \_\_\_\_\_

# Instructions

## Religious School Registration

### 2007-2008

Students will not automatically be enrolled in the next grade.  
If we do not receive a form, a child will not be registered for classes.

1. Please complete a separate set of forms for each child (including the two-sided registration form and class selection chart) and return it to the Religious School office by June 30, 2007. If you need additional copies of the forms, please call the Religious School office (856-489-0035).
2. If you are unsure of your session choice by June 30<sup>th</sup>, please return your form anyway with your best guess of your final choice. You can make a change later by calling the office.
3. Remember to attach a copy of each child's health insurance card to his/her registration.
4. Make sure you have chosen a session for each child (K – 6) for Sunday School and a day for each child (grades 2-5) for Hebrew School. The schedule of sessions is as follows:
  - All K – 6<sup>th</sup> grade students attend Sundays from 9:00 – 11:00 AM (Session I) or 10:30 – 12:30 PM (Session II).
  - Hebrew School students in grades 2 - 5 may attend either Tuesday or Wednesday afternoon from 4:15 – 6:15 PM. Please indicate your choice on the registration form.
  - The Parent-Child Hebrew Initiative will be offered for students in Grades 2 & 3. This program will meet on Wednesdays from 6:30-8:00 PM. The same parent must attend each class session with his or her child to participate.
  - All 6<sup>th</sup> grade students attend Wednesday evenings from 7:00 – 8:30 PM in addition to Sunday mornings.
  - All 7<sup>th</sup> grade students attend a special program once a month. A separate schedule will be given to those families. They also attend Wednesday evenings from 7:00 – 8:30 PM. A second registration form - **for course selection** - is required for 7<sup>th</sup> grade.
  - 8<sup>th</sup> – 10<sup>th</sup> grade students attend Tuesday evenings from 7:00 – 9:00 PM.
  - All 11<sup>th</sup> & 12<sup>th</sup> grade students attend Tuesday evenings from 7:00 – 8:30 PM.
5. All students from 3<sup>rd</sup> – 7<sup>th</sup> grades must be registered for both a weekend class and a mid-week class. 7<sup>th</sup> graders must attend mid-week as well as monthly weekend programs. All 2<sup>nd</sup> grade parents are urged to sign up their children for Head Start Hebrew. This experience greatly enhances the ease of learning Hebrew in future grades.
6. Registration will take place on an ongoing basis. We will make every effort to accommodate your request for a specific session or day of the week. We will inform you if we cannot meet your request. Siblings will be placed on the same day and session unless we are informed of a request not to.
7. Requests to be placed with a friend in class will be taken for Judaica classes only. You may request to be placed with up to 2 friends. The requests must be mutual to be fulfilled. Registrations returned by the June 30 deadline will be given first priority when fulfilling such requests.
8. When filling out the registration form there is a place for you to communicate information about your child to Rabbi Debbie Cohen, Rabbi for Lifelong Education, and the teacher. If your child is allergic to something and needs special medication, or if your child has been diagnosed with a learning disability, please make sure to indicate that on the form. This information is vital for the teacher so that he/she can be most effective with your child. If there are issues that can't be written on the form, please call the Religious School office and arrange for a conference with Rabbi Debbie Cohen or Barry Pisetznier.