

Temple Israel Ner Tamid Religious School
2011-2012 Registration Form

Please complete all the information below and on the reverse side for your child(ren)
who will be attending our Religious School this year.

Parents/Guardian Names

Street Address

City

Zip Code

Home Phone #

Mother's Work #

Father's Work #

Mother's Cell or pager #

Father's cell or pager

E-Mail Address

Emergency Contact Person

Relationship to child

Phone #

Student Name

(M/F) Birthday

Grade (2010-2011)

Name of Secular School

Rel. School Schedule

<p>Religious School Tuition \$325.00/ child, Sunday only \$400.00/ child Sunday & Wednesday \$700.00 Actual cost of educating my child</p>
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In order to assure that your child's learning and health issues are addressed, please answer the following questions, as completely as possible, for each of your children.

Does your child have an IEP or a 504 plan at school? If yes, please include your child's name and handicapping condition (e.g., LD, speech, occupational therapy, etc.). Please provide us with a current IEP or 504 plan for our files so that we may best help your child learn.

Please list any health issues, problems or allergies for your child(ren). Please identify all medications your child takes for any of these conditions.

If the parents are divorced who is the custodial parent? What is the custody arrangement? Please identify any circumstances with regard to custody, visitation, etc. that we should be aware of.

Please list any other circumstances that pertain to your child's living arrangements at home, i.e., parental disabilities or illnesses, etc.