Nancy H. and David B. Posner Judaic Education Magnet @ Har Sinai Congregation

2017-2018 Torah360 & Youth Engagement Registration

Student Last Name:	First Name:	Hebrew Name:	Nickname:

Gender Identity: M F	Date of Birth: / /	Public/Private School Fall 17:	Entering Grade:	Judaic Education Grade (only if different):

Synagogue Member? Y N	Student Cell:	Student Email:

T-Shirt Size: Youth ___ S ___ M ___ L or Adult ___ S ___ M ___ L ___ XL

☐ Receive Email? Parent1 Full Name:	☐ Receive Email? Parent2 Full Name:
Address	Address
City / State / Zip	City / State / Zip
Home # / Work # / Cell #	Home # / Work # / Cell #
E-mail Address	E-mail Address
Parent's Occupation	Parent's Occupation
Please contact me about: ☐ Serving on the Youth Education Committee ☐ Assisting with special short-term projects	Please contact me about: ☐ Serving on the Youth Education Committee ☐ Assisting with special short-term projects

Parent or Parents presently: single married partnered separated divorced

If separated/divorced, student lives primarily with: both parents Parent 1 Parent 2 Should both receive mailings? Y N

CONFIDENTIAL INFORMATION

Does your child have any special learning needs (i.e. gifted, learning challenges, IEP [please provide a copy], behavioral concerns, speech, vision or hearing challenges)?

_____

_____

Medical needs, i.e. daily medications, allergies (please list all), chronic or other health concerns:

_____

_____

Have there been any major changes in your child's life situation (such as birth or death in family, moving, divorce)? Does your child visit a parent on a regular basis which will affect attendance?

_____

The following people are authorized to pick up my child from Youth Programming:

Name: _____ Phone #: _____ Cell #: _____

Name: _____ Phone #: _____ Cell #: _____

(OVER)

Registration Fees

Grade	HSC Member Fee*	Community Fee**
☐ Grade 8 MIT Program	$0.00	$75.00
☐ TORAH360!	$500.00	$900.00
☐ Confirmation360 Fee ☐ Journey360 (Graduation) Fee	TBD based on enrollment	(in previous years: $1200.00)
☐ Add HaSTY (Grades 9-12) ☐ Add Kol Tov (Grades 6-8)	$54.00 $54.00	$72.00 $72.00
☐ JEM Parents' Association	$18.00 per family	

Tuition is payable in full or you may choose to pay half at registration and the balance by March 31, 2017.

Any outstanding tuition balance due to temple must be brought current before enrollment for 2017-2018 will be processed.

✡ **Confirmation Program tuition includes most aspects of the Confirmation experience, including class materials, trip, photos, robes, flowers and service booklet, with the exception of the Shabbat dinner.**

Refund Policy: Once school begins, refunds are given only to those families who relocate from Baltimore. When the Temple Administrator receives written notification, postmarked no later than December 15, half the tuition paid will be refunded. No refunds will be issued after December 16.

I hereby give my consent to the Director of Congregational Learning and Programming, or person designated by same, to make available to my child professional emergency medical care if such care is necessary. It is understood that a conscientious effort will be made to notify me or my spouse before such action is taken. In the event this is not possible, I give my permission for my child to receive proper medical care by any doctor, nurse, paramedic or hospital medical staff.

My child has my permission to participate in all activities that are part of the Judaic Education Magnet program for which he/she is registered, including field trips.

Insurance Co: _____ Authorization Phone # _____

Member ID # _____ Group ID# _____

Physician's Name: _____ Phone # _____

Parent's Signature: _____ Date: _____

Emergency Contact Person **other than self or spouse**:_____

Phone # _____ Cell # _____

Relationship to Student: _____ _____

Payment Options

Choose Payment Option:

☐ Full payment

☐ Half at registration and the balance due by March 31, 2018.

Payment Information

☐ MasterCard ☐ Visa ☐ Discover

Card #: _____

Expiration Date: _____

Total Amount Authorized: _____

Name on Card: _____

Signature: _____

☐ Check # _____ ☐ Cash

THIS AREA FOR OFFICE USE ONLY

Family Name _____

New: Y N

JEM Admin Initials _____

HSC TA Initials _____

Notes:

Tuition _____

PIF Disc.5% _____

Yth Activities _____

JEM PA Dues _____

Total Due _____

Date Rec'd _____

Check #/CC _____

Amt. Rec'd _____

Expectations of Our Families
Please read and sign:

Students will attend and participate fully in the program, unless other arrangements have been made with the Director of Congregational Learning and Programming. Students will arrive on time and remain on the premises and in the program until its conclusion. If a student needs to leave early, the student will wait in the classroom until a parent arrives at the JEM office to sign them out. Guests are welcome with advance approval from the Director of Congregational Learning and Programming. Consent from the visitor's parent or guardian must be obtained in advance as well.

Inappropriate behavior, as determined by any teacher or administrative staff member, will not be tolerated. Families will pay for any damage their student causes. Inappropriate behavior could result in a student's suspension or expulsion from the program. Students are representatives of themselves, their families, JEM and Har Sinai Congregation.

We understand that, from time to time, additional rules may be implemented, and we agree to abide by such additions. We have read and discussed these expectations and their consequences as a family. We understand that these expectations are designed to promote the health and safety of all students and to protect the building and properties where programs are conducted.

_____I give permission / _____ do not give permission for my child's photograph/video image to be used in community and Congregational promotional materials.

Parent Signature Date

Student Signature Date