



Registration Packet
Heska Amuna Religious School
2016 - 2017
5777

Dear Parent,

Congratulations for taking a positive step in your child's education by choosing to enroll them in religious school! We have many learning activities and enrichment activities prepared for your child.

All registration forms must be completed by **Sunday August 21, 2016**. We cannot have your child in school without these forms.

Communication between home and school is a top priority for both safety and education quality. For your child's success, regularly check your email or the HARS Facebook page.

We love the chance to get to know you and your family! Our school is open to children ages 4-12 of Heska Amuna Synagogue members. **Our Gan K'Ton program, ages infant through age 4 is open to the Community.** If you have not yet made a commitment to a religious institution, please contact us for information about our school trial period and the benefits of membership.

Thank you for including us as part of your children's Jewish education. We look forward to working with your entire family in the coming year!

B'Shalom,

Betty Golub
Youth and Family Programming Director

Miriam Weinstein
Board of Trustees Vice Chair

Heska Amuna Religious School TUITION 2016-2017

Heska Amuna Synagogue is committed to providing this for our future. The Religious School is funded by a combination of parent fees, Synagogue budget, and grants. School fees cover expenses involved with providing the best possible supplemental Jewish education. Fees include the cost of:

- 8 teachers
- textbooks, teacher guides, and curriculum
- healthy snacks and drinks
- basic supplies
- selected special programs

To help keep costs down, please volunteer to sponsor snacks, assist in your child's classroom, or help with special events (see Volunteer Form in this packet).

Back by popular demand! Sibling discount!! For multiple students, take 10% off the total tuition.

Don't miss out on our brand new EARLY BIRD SPECIAL! Pay the following reduced tuition rate for Religious School by August 21, 2016 (or set up a payment plan with Betty before the 21st).

There will be a \$50.00 increase per child after August 21, 2016

<u>Grade</u>	<u>Early Tuition</u>
Gan K'Tan	Free
Activity Fee for Pre K - Prozdor (this avoids many small fees throughout the year)	\$50
Pre K - Prozdor Students attending 1x a week	\$175
3rd - 8th Grade students attending 2x week	\$275
Bar/Bat Mitzvah Tutoring	\$400



TUITION PAYMENT 2016-2017

Tuition is due by **August 21, 2016**. Families who wish to make arrangements to pay tuition over time or to obtain financial aid should contact Betty Golub by August 21st. Betty will contact the Financial Vice Chair and the financial aid process is completely confidential.

Student name(s): _____

_____ (number) Programming Fee (all PreK - Prozdor)	x \$50 =	_____
_____ (number) Students attending once per week	x \$175 =	_____
_____ (number) Students attending twice per week	x \$275 =	_____
_____ (number) Bar/Bat Mitzvah students	x \$400 =	_____
	TOTAL = \$	_____
	10% discount for multiple children = -	_____
	TOTAL = \$	_____

I wish to pay by:

- _____ Cash
- _____ Check
- _____ Bill my synagogue account
- _____ Credit Card on file

Credit Card not on file - please call the synagogue office to provide card information

Heska Amuna Religious School

Returning Parent Information

*** Please complete each year in case there are any changes ***

Mother's name

Mother's cell #

Mother's occupation

Mother's email

Address _____

Father's name

Father's cell #

Father's occupation

Father's email

Address (if different) _____

If parents live apart, to whom shall we send mailings/email?

both parents mother father other _____

Are there custody issues that we should be aware of? If yes, please explain briefly or make an appointment with the Education Director.

Adult(s) other than parent to contact in case of emergency (include cell number):

To ensure safety of the child(ren) list people authorized to pick up my child(ren) (include cell number):

Heska Amuna Religious School
Student Information Form (1 form per child)

Please print or copy this form for each child in HARS, or pick up in the office.

First name	Last Name	Hebrew name
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Birthday - mm/dd/yy _____

School Name and location	Grade
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Does your child have any special physical or learning considerations?

Please list any allergies (including food and medications) (use back if needed):

Please list any health concerns/medication we should be aware of (use back if needed): _____

Student's physician: _____ Phone: _____

Preferred Hospital: _____

Insurance Company	Policy Number
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Volunteering

Involvement in religious school functions is the best way you can show your child that you value their Jewish education and support them personally. **All parents are expected to find at least one volunteer option that works into their schedule for the coming year.**

There are opportunities that will fit all schedules!

_____ Rotate weekly with other parents for Sunday Morning Door Supervision (9:30-12:30pm)

_____ Rotate weekly with other parents for Wednesday Afternoon Door Supervision (4 - 5 pm)

_____ Classroom Volunteer (for special projects, or any time schedule permits)

_____ Help with a Meyuhad (special) class

_____ Art

_____ Music (singing, playing an instrument, or helping learn songs)

_____ Cooking

_____ Israeli Dancing

_____ Crafts

_____ Substitute for absent/out of town teacher (lesson plan provided)

_____ Help with childcare for High Holidays

_____ Help with food for High Holiday Childcare Program

_____ Special Event (set up & clean-up)

_____ Bring snacks

_____ Drive students on field trips

_____ Religious School Fundraiser--plan and implement

_____ Website and Social Media--update

_____ Serve on the Education Committee

_____ Create a bulletin board

_____ OTHER (describe) _____

**Heska Amuna Synagogue
School Trips Permission Form
2016-2017**

FAMILY NAME _____

I give permission for my child(ren) _____
to participate fully in all activities of Heska Amuna Religious School for the
2016/2017 school year. I understand that field trips will be adequately supervised,
and transportation will be arranged either by parent carpools, school buses, or
walking, and that I will be informed beforehand of all such trips.

I hereby empower the Religious School Director or appropriate staff member to
act for me in accordance with his/her best judgment in case of an emergency.

Please list allergies and the appropriate response: _____

Preferred Hospital: _____

Insurance Company Policy Number

Signature of Parent or Guardian: _____

Name of Parent or Gardian (please print) _____

Date: _____



Heska Amuna Synagogue Photograph Release Form

I _____ (print name) hereby grant permission to Heska Amuna Synagogue to use, publish, re-use or re-publish my photograph or image on its Website and/or in other official printed publications with or without accompanying text which might include my name or other identifying information and to copyright such photograph or image in its name or any other name.

I acknowledge the Synagogue has the right to crop or treat the photograph or image at its discretion. I also acknowledge that the Synagogue may choose not to use my photograph or image at this time, but may do so at its own discretion at a later date. Further, the Synagogue reserves the right to discontinue the use of any photograph or image without notice.

This authorization is continuous and may only be withdrawn by my specific written termination of this authorization. Such termination of authorization will not affect the Synagogue's rights with respect to any uses that began prior to the date of the termination even if that use continues thereafter.

I also understand that once my image is posted on the Synagogue's Website, the photograph or image can be downloaded by any third party either affiliated or not with Heska Amuna Synagogue. Therefore, I release and agree to indemnify the following, and their successors, heirs and assign, from any claims on the Board, employees, and webmaster of Heska Amuna Synagogue.

For persons over 18:

Name (print): _____ Date: _____

Signature: _____

For persons under the age of 18, the permission of a parent or guardian is required on this Photograph Release Form.

I _____ (print name) hereby grant permission to the Heska Amuna Synagogue to use the photograph or image of my child as outlined above.

NAME OF CHILD UNDER 18: _____

(check 1) _____ Please identify by first name only _____ Please do not identify by name

I _____ (print name) DO NOT grant permission to the Heska Amuna Synagogue to use the photograph or image of my child as outlined above.

Signature of parent or guardian: _____ Date: _____