



Dear Families,

Though September seems far away, plans are underway for an amazing school year and the teachers and I are really looking forward to welcoming your children back to Hebrew School in the fall! Please return the enclosed 2019-2020/5780 registration forms as soon as possible and help us provide your children with the best teachers and curriculum materials.

If you are planning to bring the registration packet to the Temple on the first day of classes it is important to let us know about your plans and reserve a seat for your child/ren in the class of your preference. Please mail or fax the Registration Form to the Temple Office as soon as possible. The Confidential and Permission Forms may be returned on the first day of classes.

If you would like to discuss alternative financial arrangements, please contact Bill Abrams, Village Temple Financial Secretary at [abramsw@att.net](mailto:abramsw@att.net)

This is a very exciting time as we are moving forward at the Village Temple. I hope you and your family enjoys a refreshing summer and look forward to a great year of Jewish life and learning at the Village Temple!

Please call 212-674-2340, ext. 308 or email at [atansky@villagetemple.org](mailto:atansky@villagetemple.org) with any questions you may have.

L'shalom,

Alex Tansky, R.J.E.  
Director of Education

# Registration Form 2019-2020/ 5780

**Student's Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
First                      Middle                      Last

**Student's Address:** \_\_\_\_\_ **DOB:** \_\_\_\_\_  
Street/Apartment                      City                      State                      Zip

**Student's Hebrew Name:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Secular School:** \_\_\_\_\_ **Secular school grade in Sept. 2019** \_\_\_\_\_

**Did your child attend a Summer Camp in 2018? Camp Name:** \_\_\_\_\_

**Did your child attend a Summer Camp in 2019? Camp Name:** \_\_\_\_\_

**Parent/Guardian (1)** \_\_\_\_\_ **Daytime Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

\*May we use e-mail as method of contact (class announcements, information etc.)?    Yes        No   

**Occupation:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Parent/Guardian (2)** \_\_\_\_\_ **Daytime Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

\*May we use e-mail as method of contact (class announcements, information etc.)?    Yes        No   

**Occupation:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Sibling Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Registered**

**Sibling Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Registered**

### Pick-Up Approvals

Name(s) of person(s) approved to pick your child up from school. Please indicate if your child has approval to walk home unattended or if there are any other special instructions. My child can walk home unattended   

### I am registering my child for:

Pre-K  Kindergarten  Grade: \_\_\_\_\_ Day Option (select one): Weekday  Sunday

## PERMISSION FOR PHOTOGRAPHS AND PUBLICITY

I/We understand that my/our child's likeness may be photographed or videotaped in an effort to inform the community of our unique Religious School programs and events. These images or videos (without names attached) may be used in school and community-wide publications, brochures, website, emails to members and non-members and other promotional media.

PLEASE CIRCLE ONE: I/We Agree                      I/We Do Not Agree                      Initial here: \_\_\_\_\_

# PERMISSION FORM

2019-2020/ 5780

## The Village Temple Religious School and Junior Youth Group

33 East 12th Street, New York, NY 10003  
212-674-2340, ext. 308 Fax 212-674-1744

My son/daughter \_\_\_\_\_, (in grade \_\_\_\_\_ on day \_\_\_\_\_), has my permission to attend Religious School and Junior Youth Group Class Trips during the 2019-2020 school year. My child is in good physical health and does not have any physical disabilities which might be aggravated, unless otherwise noted below on this form, or placed in writing and attached.

I hereby authorize the Temple Educator, the Junior Youth Group Advisor, and other adult staff members, to act as my agents to consent to and/or to arrange any emergency medical treatment that may be deemed necessary by a physician, such as hospitalization, injection, anesthesia, or surgery, in the event that I cannot be reached in an emergency.

It is my understanding that all medical attention and/or health care needed, if necessary, in an emergency will be billed to me.

Signature of parent or guardian \_\_\_\_\_

Full name of child \_\_\_\_\_

Medical insurance and policy number \_\_\_\_\_

\_\_\_\_\_

Doctor's name and phone number \_\_\_\_\_

Special information, allergies, medications taken, \_\_\_\_\_

### Emergency Contacts

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

## Volunteer for YOUR Community!

We need YOU to help the Village Temple and its Religious School be the best congregation and Hebrew school for our families. Please write down any skills you have that you would be glad to share with the Temple community. We thank you for your help! \_\_\_\_\_

# The Village Temple Religious School

33 East 12th Street, New York, NY 10003  
212-674-2340, ext. 308 Fax 212-674-1744

In order to register your child for Religious School you must be a member in good standing of The Village Temple (except for Pre-K and Kindergarten). Membership forms are available from the Temple office or at [www.villagetemple.org](http://www.villagetemple.org).

---

## 2019-2020 CLASS SCHEDULES

---

Pre-K, Kindergarten	Sundays (see schedule)	9:00am – 10:45am
Grades 1, 2	Sunday	9:00pm – 11:00pm
	or Tuesday	3:45pm – 5:45pm
Grades 3, 4	Sunday	11:00 – 1:00pm
	or Tuesday	3:45pm – 5:45pm
Grades 5, 6, 7	Sunday	9:00pm – 1:00pm
	or Wednesday	3:45pm – 6:00pm

---

<h2>2019-2020 TUITION FEES</h2>
---------------------------------

Pre-K and Kindergarten		\$995
Grades 1-4	Tuesdays or Sundays	\$1,260
Grades 5-7	Wednesdays or Sundays	\$1,745

- There is a \$100 discount for each sibling.
- Security badges will be sent to registered families, and will be required to drop off and pick up your child.
- *Madrich* registration for grades 8-12 will be sent under separate cover.

# THE VILLAGE TEMPLE RELIGIOUS SCHOOL

33 East 12th Street  
New York, NY 10003  
212-674-2340, ext. 308 Fax 212-674-1744

Dear Village Temple Families,

We want to make sure that every child has a positive learning experience at the Village Temple Religious School. We need your help in creating the best possible classroom situation. Please take the time to answer the questions on the reverse side of this letter.

This information can be of invaluable help to your child's teacher in trying to create the best learning environment for each student.

This information will be shared only with your child's teachers, the Rabbi and the Cantor/B'nai Mitzvah tutor.

If you have any questions, please give me a call at 212-674-2340, ext. 308.

Many thanks for your assistance.

L'Shalom,

**Alex Tansky, R.J.E.**  
**Director of Education**

Please see reverse side

**THE VILLAGE TEMPLE RELIGIOUS SCHOOL**  
**33 East 12th Street**  
**New York, NY 10003**  
**212-674-2340, ext. 308 Fax 212-674-1744**

Student's name: \_\_\_\_\_

Age and Grade: \_\_\_\_\_

Allergies: \_\_\_\_\_

Vision/Hearing Difficulties: \_\_\_\_\_

Learning Strengths: \_\_\_\_\_

Learning Difficulties: \_\_\_\_\_

Special Gifts & Talents: \_\_\_\_\_

Favored Learning Styles: \_\_\_\_\_

Family: Are there any special religious issues at home?

In the case of divorced or separated parents, please indicate with whom the student lives:

Brothers/Sisters and Ages: \_\_\_\_\_

Any other information which you think would help your child's learning: