2021-22 Congregation Shir Shalom Religious School Individual Student Registration Form

One registration form needed for <u>each student</u> to be enrolled in the Religious School K-12 Programs. Return forms and payment to our business office. Membership needs to be in *good standing and* tuition paid in full for registration to be complete.

_____ Place "A" here if student has food or medication allergies (Add details on page 2)

____Student's Grade: Fall 2021 Name of K-12 school attending: _____

Prior Hebrew instruction: No Yes If not at Shir Shalom, # years Student Name: ____ First Name Last Name Hebrew Name City State Zip Home Telephone:_____ Today's Date: School Attending 9/20/21: School District: Do you wish mailings to be sent to a parent living in another household? Yes No Name & Address: Parent/Guardian _____ Names: Parent #1- Last Name, First Name Work Telephone Parent #1 Email: Work Telephone Parent # 2 - Last Name, First Name Parent #2 Email: _____ Cell Phone #s: _____ Parent #1 Parent # 2

*Contact information may be used by "Grade Parent" to create email lists.

Important Volunteer Opportunity: Elect to be a Grade Parent!!(Please check one)YesYes/If NeededNoPlease consider becoming a class parent.Responsibilities are minimal but it is in the
interest of all Religious School families that each grade has a parent representative.

<u>Class Placement Requests</u> - Parent may request placement of their child in class with *one* other student. Please do not list more than one name. Students will be placed together *only if* it is educationally appropriate: **Name of ONE friend**: