

2019-2020 JCCH Kehilah School Registration Information Form

- Please complete Registration and Information forms and return to the JCCH office with a \$300 deposit to secure your child's enrollment for fall 2019.
- Tuition rates are subject to change.
- Any outstanding balances owed the JCCH must be resolved before a child can be enrolled for 2019-20.
- Tuition for 2019-20 must be paid in full by the first day of school unless prior arrangement has been made with the JCCH Executive Director or Treasurer.
- Every registration must be accompanied by a copy of student's vaccination history.

Grade	Tuition	Hours
Shorashim Kindergarten	\$975 + \$75 for supplies	Wednesday- 3:45-5:45pm
1st Grade	\$975 + \$75 for supplies	Wednesday 3:45-5:45pm
2nd-5th Grade	\$1800 + \$100 for supplies	Sunday 9-11:30am and Tuesday 3:45-5:45pm OR Wednesday 3:45-5:45pm
6th Grade	\$1800 + \$100 for supplies	Sunday 9-11:30am and Tuesday 3:45-5:45pm OR Wednesday 3:45-5:45pm
7th Grade	\$1675 + \$100 or supplies & dinner	Wednesday evening 6-8pm and one Sunday a month
8th Grade	\$550 + \$100 for dinner & supplies	Wednesday evening 6-8pm
9th & 10th Grade	\$975 + \$100 for dinner & supplies	Wednesday evening 6-8pm
Student Aides-Madrachim (8 th -12 th graders)	Community Service Opportunities or Work for Pay (must be 14 and older). For enrolled or confirmed Hebrew High and Day School students.	Sunday mornings, Tuesday or Wednesday afternoons

TRIP PERMISSION - I hereby permit my child(ren) to attend any trip sponsored by JCCH for educational purposes provided that he/she is supervised by a member of the JCCH staff or by JCCH parents who are selected as chaperones.

Parent's Signature _____ Date _____

PHOTO RELEASE FORM- From time to time, JCCH may use your child's name, likeness, voice, statements and other information supplied by him/her in a variety of synagogue publications, including but not limited to: Newsletter, Weekly Calendar, Fliers, JCCH website (both photos and mini videos without individual identification on public side of the site, but with names on the password protected side). This use relates solely to photographs, statements and videotape made during your child's participation in JCCH sponsored activities. Please check your preference and sign below allow my child/ren _____ I allow my child(ren)'s name, likeness, voice, statements and other information supplied by my child(ren) to be used by JCCH.

_____ I object to my child(ren)'s name, likeness, voice, statements and other information supplied by my child(ren) to be used by JCCH.

Parent's Signature _____ Date _____

VOLUNTEER OPPORTUNITIES- Please sign up below.

We are hoping to have a volunteer for every classroom and all programs.

Class Parent for Grade _____

2019-2020 JCCH KEHILAH SCHOOL REGISTRATION FORMS

STUDENTS INFO	CHILD 1	CHILD 2	CHILD 3
Student Full Name			
Hebrew Name			
Gender			
Birthday			
Grade & Name of School as of Sep 2019			
Grade at JCCH as of Sep 2019			
Kehilah Grades 2-6 Choice of Day: Sunday + Tuesday or Sunday + Wednesday			
7th Grade / Wednesday & 1 Sunday per month			
Madrichim/Student Aide: Sunday & Tuesday or Wednesday			
High School Grades 8-10th Wednesdays 6pm-8pm			
Youth Group 2nd-6th grade (please check)			
Special Medical Conditions (allergies, medication, etc.)			

PARENTS INFO	<u>Parent #1/ Guardian</u>	<u>Parent #2 / Guardian</u>
Name		
Address		
Home Phone		
Cell Phone		
Email		
Emergency Number		

Information Form 2019-2020

**THIS FORM MUST BE FILLED OUT YEARLY.
YOU MUST SUBMIT THIS FORM IN ORDER FOR YOUR CHILD TO BEGIN
ATTENDING CLASS IN SEPTEMBER.**

**PLEASE NOTE: FORM MUST BE ACCOMPANIED BY STUDENT'S
VACCINATION HISTORY.**

Mail: JCCH, 130 Union Ave, Harrison, NY 10528; Fax: 835-5195

In an effort to meet your child's individual needs please provide us with any information about your child that may enable JCCH to provide the best Jewish educational experience possible. All information received will remain in strict confidence and will be disclosed to your child's teacher only at your request.

Name of Child _____ Grade _____ Date _____

Information Supplied By _____

1. Please list all medications your child takes and reasons why.

2. Does your child have an IEP? NO YES . If yes please include a copy.

3. Is your child provided any learning assistance during the school day? (Some examples include resource room, special classes, individual tutoring, and aide.) If yes, please explain.

4. Please describe any physical and learning issues that may affect your child's learning or social adjustment

5. Please describe any family arrangement that may affect your child's attendance:

May we share this information with the teachers? Yes No

Please feel free to call Ronit Razinovsky, Educational Director, at 835-2850 ext. 125,
if you would prefer to discuss the above information in person.
