

June 1, 2015

Dear Religious School Families:

With everything there is a time, and this is the time to register for Religious School next year! I am excited to be spending time this summer working on the curriculum. Next year, we will be adding some fabulous family activities to each grade! It is without question that we always aim to better ourselves, just as we aim to better our programming! I am looking forward to seeing you in the fall and participating *with* you throughout the year in different educational opportunities for our students!

The first day of Religious School for grades Pre-Kindergarten thru 7th, madrichim, (and parents!) will be Sunday, September 20th, 9:30 – 12:00!

Please note that we have enclosed ONE Student Registration Form. It should be filled out for each individual child. *Registration and payment can now also be done through our website (www.cmihamden.org) but you will still need to fill out a student registration form by hand and send it in.* **All registration form(s) and tuition payments are due August 21st . If you need to arrange for a tuition payment plan, please contact Jennifer Levin-Tavares in the CMI office.**

We intend to use e-mail and Constant Contact as much as possible. Please make sure your email is updated on the registration form! **Unless the “DO NOT” box is checked, we will assume that the e-mail address you provide can be used for regular communications from the school, and that this e-mail address is in fact checked on a regular basis.**

A copy of the calendar has been included in this mailing for your convenience. Note that family programs and events will be included on the fall calendar, but are not all available now. Religious School packets (including the school calendar, parent handbook, a description of all student/family events and programs, child’s teacher(s) and room number) will be handed out to families on the first day of school.

For teenagers in 8th-12th grade: Our Madrichim program will continue this coming year. **Please send back the registration form by August 1st if you are interested in participating as a Madrich.** CMI High registration forms are expected to be sent out by September 1st. Please look out for these forms when they come. As a reminder, CMI High is required for all Madrichim in grades 8-10 and encouraged for 11th and 12th graders.

L’Shalom,

Michelle Goldstein

THE CONGREGATION MISHKAN ISRAEL RELIGIOUS SCHOOL
STUDENT REGISTRATION INFORMATION
2015-2016/5776

IMPORTANT: Please complete one form for each student. This form is 3 pages! (Please Print)

Student's Name: _____
Last First Middle

Hebrew Name: _____

Birth Date: ____/____/____ **Male** _____ **Female** _____

Entering Grade in the Fall of 2015 (CMI): _____ *New Student to CMI : Yes* ____ *No* ____

Entering Grade in the Fall of 2015 (district school): _____

Name of Secular School: _____

Parent/Guardian _____ **Jewish (yes/ no)** _____

Address: _____
Street City Zip Code

Home Phone: _____ **(Cell)** _____

E-Mail Address: _____

If you do NOT want this e-mail address to be used as the primary means of communication from the school, please check here: ____

Occupation: _____ **(Work Phone)** _____

Parent/Guardian _____ **Jewish (yes/no)** _____

Address: _____
Street City Zip Code

Home Phone: _____ **(Cell)** _____

E-Mail Address: _____

If you do NOT want this e-mail address to be used as the primary means of communication from the school, please check here: ____

Occupation: _____ **(Work Phone)** _____

Does the child/ren live with both parents? ____ **If not, with whom does the child/ren live?** _____
Should the second household receive notices? _____

Please Help Us Meet Your Child's Needs

In order to provide the best educational experience for your child, please let us know any social, emotional or physical issues that may be a factor in the classroom. Please include strengths, talents and interests as well as challenges. If your child has an Individualized Educational Program (IEP) please provide us with that information and/or contact Michelle Goldstein to discuss.

EMERGENCY CONTACTS: (when parents cannot be reached)*

Name: _____ Relationship: _____
Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____
Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____
Home Phone: _____ Work Phone: _____

* Reminder: Please notify these individuals that you are designating them as your child's emergency contact.

STUDENT MEDICAL

Student's Physician: _____

Phone Number: _____

Address: _____

Student's Dentist: _____

Phone Number: _____

Address: _____

Does student have any allergies or conditions that may require immediate or emergency care?

Yes _____ No _____

If "yes" please list and describe treatment in the space provided below:

If there is an asthma or emergency care plan written out by your child's physician, please provide us with a copy.

Does your child have any medical conditions or take any medication(s)?

Yes _____ No _____

If "yes" please list and describe in the space provided below:

RELIGIOUS SCHOOL DIRECTORY:

Your participation in the Religious School Directory will provide regular communication with your child's teacher(s), assist room parents with coordinating and announcing school events as well as offer information for those interested in carpooling. This information will ONLY be used for Religious School purposes.

- Yes, I would like to participate in the Religious School Directory
- No, I would not like to participate at this time.

STUDENT PHOTO RELEASE:

During the school year special events and class activities at the CMI Religious School are illustrated in the local newspapers and magazines. The CMI Religious School requires parental permission in order to use photos that include your child with any school publicity or classroom activities.

- Yes, I give Congregation Mishkan Israel Religious School permission to use photos of class or activity/special events that include my child for publication or curriculum purposes during the 2015-2016 school year.
- No, I would not like to participate at this time.

I have reviewed this registration application and certify that all information is complete and valid.

(Parent/ Guardian Signature)

(Date)