KEHILLAT MA'ARAV
THE WESTSIDE CONGREGATION
קְהִלַּת מַעֲרָב

Religious School Student Registration
2020-2021

Student Name:	Gender:	Birthdate:	*Please attach recent photo.*
Hebrew Name:		Grade in Religious School:	
Secular School:		Grade in Secular School:	

FAMILY INFORMATION

Parent 1 Name:	Parent 2 Name:
Religious Background:	Religious Background:
Address:	Address:
Cell #:	Cell #:
Email:	Email:
Work Ph:	Work Ph:
We rely heavily on email. Which email should we use?	

PHOTO RELEASE & CONSENT

I ___ do/___do not give permission for photographs and video of and artwork by my child to be used by Kehillat Ma'arav Religious School for promotional purposes.

During Kehillat Ma'arav Religious School classes, family programming, Kadima and other events, we will be taking video and photos of your children for our Parent Newsletters, RS photo walls, RS videos, website, advertising, publicity, etc. We will not post your children's names but we will be using their likeness. Please sign this release form that you agree for us to take photos and video of your children for all videos, photo walls, website, advertising, KM Facebook and publicity purposes. This will remain in force unless otherwise revoked in writing. **Initials _____**

PARENT QUESTIONNAIRE & STUDENT LEARNING GOALS

If your child/children are new to this school, what is their Jewish education background?

What are your goals for your child this year?

Do you have specific concerns about your child's academic progress or behavior?

Does your child have any noted health or behavior problems and/or diagnoses that might affect his/her behavior or academic progress? Does your child follow an IEP? Sharing this information allows us to provide the best learning environment for your child.

Is your child dealing with any personal or family issues that might affect his/her behavior or academic progress?

Does your child have questions or concerns about school? (Complete this section with your child.)