

# Beth Shir Sholom Religious School Registration 2009-2010

Please complete all information on BOTH SIDES of this form in ink.  
Please note: A form must be completed for EACH child.

Student's Last Name \_\_\_\_\_ Student's First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Student's Hebrew Name \_\_\_\_\_ Parent's E-mail \_\_\_\_\_ Student's e-mail \_\_\_\_\_

Name of Public School \_\_\_\_\_ Grade in 2009-2010 \_\_\_\_\_ Religious School Grade 2009-2010 \_\_\_\_\_

Mother's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Father's Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Cellular Phone \_\_\_\_\_ Pager \_\_\_\_\_ Cellular Phone \_\_\_\_\_ Pager \_\_\_\_\_

Does student reside with: Mother \_\_\_\_\_ Father \_\_\_\_\_ Step Parent \_\_\_\_\_ Both Parents \_\_\_\_\_ Marital Status of Parent(s) \_\_\_\_\_

Mother's Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Father's Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Does student have sibling(s) who attend Religious School? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please list below.

Name of Sibling \_\_\_\_\_ Grade \_\_\_\_\_

Name of Sibling \_\_\_\_\_ Grade \_\_\_\_\_

**Please check schedule that you request:**

**Kindergarten** \_\_\_\_\_ **First Grade** \_\_\_\_\_ **Second Grade** \_\_\_\_\_ **Third Grade** \_\_\_\_\_  
Sundays from 9:00-11:00 a.m.

**Fourth Grade** \_\_\_\_\_ **Fifth Grade** \_\_\_\_\_  
Tuesdays from 3:45-6:00 p.m. and Sundays from 11:00 a.m.-1:00 p.m.

**Sixth Grade** \_\_\_\_\_ **Seventh Grade** \_\_\_\_\_  
Wednesdays from 3:45-6:00 p.m. and Sunday from 11:00 a.m.-1:00 p.m.

**Eighth Grade** \_\_\_\_\_ **Ninth Grade** \_\_\_\_\_ **Eleventh Grade** \_\_\_\_\_ **Twelfth Grade** \_\_\_\_\_  
Teen Tuesday/Youth Group- Tuesdays from 5:00-7:15 P.M.

**Tenth Grade (Confirmation)** \_\_\_\_\_  
Confirmation Class on Tuesdays from 5:00-6:00 p.m.  
Teen Tuesday/Youth Group on Tuesday from 6:00-7:15 p.m.

**IMPORTANT: AVAILABILITY WILL BE ON A FIRST COME- FIRST SERVE BASIS**  
**Please turn over and complete side 2 – Medical Form**