

For Office Use Only: Date: _____	Enrollment <input type="checkbox"/> by (Initials) _____
Grade: _____ RS <input type="checkbox"/> HS <input type="checkbox"/>	Class lists: CC <input type="checkbox"/> Admin <input type="checkbox"/>
ShulCloud: Acct. <input type="checkbox"/> by (Initials) _____	Welcome letter <input type="checkbox"/> send date: _____

**CONGREGATION EMANU-EL OF WESTCHESTER
RELIGIOUS SCHOOL REGISTRATION FORM**

NAME OF STUDENT: _____
(LAST) (FIRST)

CHILD'S GRADE as of 9/2020 _____ CHILD'S BIRTHDATE: _____

ADDRESS: _____

EMERGENCY CONTACT: _____
(NAME) (PHONE NUMBER)

E-MAIL ADDRESS: _____

FAMILY INFORMATION

PARENT 1:

PARENT 2:

NAME: (LAST) _____
(FIRST) _____

NAME: (LAST) _____
(FIRST) _____

ADDRESS: _____

ADDRESS: _____

E-MAIL ADDRESS: _____

E-MAIL ADDRESS: _____

CELL PHONE NO.: _____

CELL PHONE NO.: _____

HOME PHONE NO.: _____

HOME PHONE NO.: _____

WORK PHONE NO.: _____

WORK PHONE NO.: _____

IS PARENT JEWISH? _____

IS PARENT JEWISH? _____

INFORMATION REGARDING STUDENT'S SCHOOL PROGRAM AND PROGRESS SHOULD BE SENT TO:
PARENT 1 _____ PARENT 2 _____ BOTH PARENTS _____

Please use this space to share any special information about your child that we should have, in order to work with him/her more constructively:

- Public/private school he/she attends: _____
- He/she is in the following special program(s) in secular school: _____
- Child's interests, hobbies, skills, musical instruments played: _____
- Special behavior patterns school should be aware of: _____
- Please list any known allergies child has: _____
- Any other information/comments: _____