

Part I. Registration Letter

Dear Parents,

It is time to register for the 5781/2020-2021 school year! **Please use Online Registration by July 1, which has pre-populated most of the information and qualifies for Early Bird/Online Discount of \$100 per student.**

- Register by July 1 ***and*** do so ***online*** to receive **Early Bird/Online Discount** of \$100 per student. **Discount will appear on Temple statement; both online and paper forms show Standard Fees.**
- **Early Bird/Online Discount** reflects significant administrative/planning cost savings to Temple from timely registration and from use of Online Registration by July 1.
- To receive the Early Bird/Online Discount you must register Online by July 1. **No exceptions will be made.**
- •\$150 deposit required per student; this deposit is fully refundable.

* * *

1. We require only one set of registration forms per family.
2. Please read all instructions carefully and then log onto your Member-only account at www.templeshalom.net under the **Membership** tab. If you need your Username or Password, please contact Cheryl McGowan at cmcgowan@templeshalom.net. **Complete Online Registration by July 1 to receive Early Bird/Online Discount.**
3. Alternatively, return Parts II through V, along with your deposit, by July 1, 2020, to the School Office:
 - **Part II. Checklist for Registration.** This form helps ensure your registration is complete and confirms that you are aware of the acknowledgements regarding registration and payment.
 - **Part III. Class and Time Choices.** Include the students' first and last names and grade level for the upcoming school year.
 - **Part IV. Tuition/Fee Schedule and Worksheet.** By July 1, 2020 – A \$150.00* deposit per student must be submitted with registration forms. This deposit is fully refundable. *\$154.50 per student (\$150 goes to TS and \$4.50 goes to PayPal)
 - **Part V. Registration Information (three pages).** Parents/guardians and student(s) full name must appear on the forms and each child's grade for Fall, 2020. Fill in all requested information. Information is pre-populated if you use the Online Form.

Please include students' Hebrew names. If your child does not have a Hebrew name, please note that in the space provided. The proper form for a Hebrew name is first and middle name and parents' Hebrew names (if they have them). For example, *Yosef David ben Rachel v'Yaakov* means Joseph David, son of Rachel and Jacob. If the child is a daughter, use *bat* instead of *ben*. Separate parents' first names by "v".

Part I. Registration Letter

Please note the following Temple Shalom Religious School policies:

- Classes are first-come, first-assigned and some classes do fill up. We will notify you immediately if the class you request is full and will place you on a waiting list. We will know in August if a session will be cancelled due to low enrollment (minimum, 10 students per class).
- We will notify you when your registration is confirmed as well as if you are wait-listed for a Hebrew day. If you have not received confirmation from us that means your registration is not confirmed.
- If you have any questions, the School Office will be open all summer during normal business hours Monday-Friday, closing at 3 p.m. on Friday for Shabbat. Email school@templeshalom.net with questions.

Students must be current with the Maryland Department of Health and Mental Hygiene's vaccine requirements for children enrolled in preschool programs and school:

https://phpa.health.maryland.gov/OIDEOR/IMMUN/Shared%20Documents/Min_Vacc_Req%2020_21_Final.pdf

Important aspects of Temple Shalom Religious School tuition and registration:

- **With exception to participation in Kids' Time, all families with children in the religious school must be Temple Shalom members. Members must be current** with all Temple financial obligations before religious school registration will be processed.
- By July 1, 2020 – A \$150.00* deposit per student must be submitted with registration forms. This deposit is fully refundable *\$154.50 per student (\$150 goes to TS and \$4.50 goes to PayPal)
- **September 27, 2020** – Tuition is due in full by September 27, 2020. Registered families opting to pay tuition over time must have their payment plan confirmed by our Financial Secretary before this date.
- **Early registration is strongly encouraged because the number of teachers we hire and the number of sessions and classes for each grade depends on the number of students registered in a particular class. The Temple incurs significant increased costs for registrations after July 1, which is reflected in the Early Bird/Online Discount.**
- **At Temple Shalom, we firmly believe that your financial situation should not prevent you from accessing synagogue life or a religious school education. If you are unable to make the above payments as scheduled or otherwise need to discuss financial concerns, please contact our Financial Secretary at FinancialSec@templeshalom.net as soon as possible to work out an alternative payment plan.**
- It is the longstanding belief and tradition at Temple Shalom that continuation of formal Jewish education for our youth through their Confirmation Year (10th Grade) is essential to establishing a life-long Jewish identity. Temple Shalom requires at the time of receiving a *b'nai mitzvah* date that each student's family commit that its student will continue their formal Jewish education (either here or through an alternative program) through 10th Grade graduation (although students may make an informed choice not to actually be confirmed) and that each student be aware of this commitment. If you have any questions, please discuss them with our clergy.

If you have any questions, please call the School Office at (301) 587-2273 or email at rabbirosenberg@templeshalom.net or email our school administrator at school@templeshalom.net.

Part II. Checklist for Registration

Please sign and return this checklist with your deposit and registration forms.

I am handing in my:

- Part III Class and Time Choices, and Part IV Tuition/Fee Schedule and Worksheet** (with all student information)
 - a. 3rd-7th grade students **MUST sign-up for BOTH Sunday and Hebrew School.**

- Part V Registration Information**
 - b. Parent/Guardian and student information
 - c. Emergency Contact Information
 - d. Temple Shalom Class Lists permission
 - e. Allergies and Health Information
 - f. Learning Needs Information
 - g. Media Release Permission
 - h. Room Parent Volunteer Form

- Required deposit of \$150* per student**

- Part II. Checklist for Registration** (this form)

I acknowledge that:

- All families, excluding families with children only in Kids' Time, must be members of Temple Shalom (Gift of Membership families are full members of Temple Shalom).

- Classes are filled on a first-come, first-assigned basis.** I will be notified when my registration is complete and if I am placed in a class other than what I have requested.

- My registration is **not complete** unless I am current in my Temple financial obligations.

- The students I am enrolling are current with the Maryland Department of Health and Mental Hygiene's vaccine requirements for children enrolled in preschool programs and school:
https://phpa.health.maryland.gov/OIDEOR/IMMUN/Shared%20Documents/Min_Vacc_Req%2020_21_Final.pdf

Parent/Guardian Signature

Date

Part V. Registration Information (Pre-Populated with Online Registration)

Sunday School: Find your child(ren)'s grade

Program & Session Choice		Kids' Time	Pre-K-5 th Gr	6 th -7 th Gr	8 th & 9 th Gr	10 th Gr.	11 th & 12 th Gr.
		Child w/ Adult (Infant – 3 yr.)	Religious School (3 yr.+)	Religious School	Chai School	Confirmation	Post- Confirmation
		9:15-10:45 am	9-11:30 am	6-8 pm	6-8 pm	6-8 pm & some Weds	6-8 Sun pm & monthly Fri or Sat
Student's Name	Gr						

Hebrew School (3rd through 7th Grade Only): Find your child(ren)'s grade – Choose day/time & program where applicable

Program and Session Choice		3 rd - 7 th Grades	
		Choose Day & Time	
		Tuesday 4:30-6 pm	Wednesday 4:30-6 pm
Student's Name	Grade		

Part V. Registration Information (Pre-Populated with Online Registration)

REGISTER ONLINE BY July 1 FOR EARLY BIRD/ONLINE DISCOUNT OF \$100 PER STUDENT

Tuition and Fee Schedule (includes materials)

Grade	Program	Fee
Kids' Time (infant- 3 yrs. old w/adult)	Sunday Program	\$535/family <i>Non-members welcome!</i>
Pre-K – 2 nd Grade	Sunday School	\$920
3 rd -5 th Grade	Sunday and Hebrew School	\$1,470
6 th – 7 th Grade	Sunday and Hebrew School	\$1,450
8 th Grade	<i>Chai</i> School	\$1,045
9 th Grade	<i>Chai</i> School	\$1,065
10 th Grade	Confirmation	\$1,970
11 th – 12 th Grade	Post-Confirmation	\$640

It is a Temple Shalom priority that all Temple Shalom member families have access to a religious school education.

Each year the Temple collects donations to provide funds to families in need to meet religious school obligations. To support families by giving *Tzedakah* for this purpose, please indicate your donation below and the Temple office will add this amount to your bill. Thank you for your generosity. **I would like to donate \$_____.**

First Friday Potlucks

Thank you for making a donation to support our potluck dinners. Your donation helps to ensure the continuation of this wonderful program. **I would like to donate \$_____.**

Tuition and Fee Worksheet

Student's Name	Grade	Tuition See Schedule	Subtotal Fees
			\$
			\$
			\$
			\$
			\$
TOTAL DONATION(S)**			Donation Total_____
Grand Total			\$

Part V. Registration Information (Pre-Populated with Online Registration)

Student #1

English Name _____ Preferred Gender Pronouns _____ Birthdate _____

Hebrew Name _____ Age _____ School Grade, Fall 2020 _____

Allergies/Health Needs? Yes ___ No___ Learning Needs/Disabilities/Gifted? Yes ___ No ___ If yes, please provide information on next page. Name of the School your student will be attending in the fall: _____

Student #2

English Name _____ Preferred Gender Pronouns _____ Birthdate _____

Hebrew Name _____ Age _____ School Grade, Fall 2020 _____

Allergies/Health Needs? Yes ___ No___ Learning Needs/Disabilities/Gifted? Yes ___ No ___ If yes, please provide information on next page. Name of the School your student will be attending in the fall: _____

Student #3

English Name _____ Preferred Gender Pronouns _____ Birthdate _____

Hebrew Name _____ Age _____ School Grade, Fall 2020 _____

Allergies/Health Needs? Yes ___ No___ Learning Needs/Disabilities/Gifted? Yes ___ No ___ If yes, please provide information on next page. Name of the School your student will be attending in the fall: _____

Student #4

English Name _____ Preferred Gender Pronouns _____ Birthdate _____

Hebrew Name _____ Age _____ School Grade, Fall 2020 _____

Allergies/Health Needs? Yes ___ No___ Learning Needs/Disabilities/Gifted? Yes ___ No ___ If yes, please provide information on next page. Name of the School your student will be attending in the fall: _____

Is there is additional information we need please let us know here:

Medical Information

Physician's Name _____ Telephone Number _____

Insurance Company _____ Policy # _____

Part V. Registration Information (Pre-Populated with Online Registration)

Allergies and Health Needs of Student(s)

Learning Needs/529 Plans/IEPs/Learning or Other Disabilities/Gifted Program of Student(s)

If your child has special learning needs, we look forward to meeting with you in advance of the start of the school year in order make sure all needs are met. Please provide copies of any 529/IEP Plans separately.

Part V. Registration Information (Pre-Populated with Online Registration)

Emergency Contact Information

In the event of an emergency, when I/we are unable to be notified, I give permission for the best available medical treatment to be administered to my child(ren). Should my child(ren) become ill or should there be a civil defense emergency or natural disaster and a parent or guardian cannot be reached, please notify one of the following people, whom I authorize to pick up my child(ren).

Name #1 _____ Relationship to Child: _____

Telephone Number(s) _____

Name #2 _____ Relationship to Child: _____

Telephone Number(s) _____

Name #3 _____ Relationship to Child: _____

Telephone Number(s) _____

I authorize Temple Shalom to obtain immediate medical care for my child(ren) should there be a medical emergency and I cannot be reached.

Parent/Guardian Signature _____

Print Name _____ Date _____

Temple Shalom Class Lists

Each year we publish class lists with all students' and parents'/guardians' names, address, email, and phone information. Please check the box below **ONLY IF YOU DO NOT** want us to include your student(s) on these lists.

I withhold permission to publish my students' names in a Temple directory by class.

Print Parent/Guardian Name _____

Parent/Guardian Signature

Image Release Permission

Occasionally we may supply information to the local community newspapers or post pictures on our website/social media sites about programs in which Religious School students participate or create promotional materials for the synagogue or Religious School. Please check one of the boxes below **ONLY IF YOU DO NOT** want us to use or release images and/or names of your student(s).

Do not use or release any images of my student(s).

You may use or release images of my student(s), but do not identify my student(s) by name in any images.

Print Parent/Guardian Name _____

Parent/Guardian Signature _____

Part V. Registration Information (Pre-Populated with Online Registration)

Volunteer Room Parent

Room parents are important! Would you like to volunteer to provide classroom support to one of our teachers? Or help be the important communication link for your child's class? No matter how much time you have to spare, participating in a child's classroom can do wonders for a child's success in school as well as provide a great way for you to be involved in the Temple Shalom community.

Yes, I would like to volunteer to become a room parent.

Print Parent/Guardian Name _____

Parent/Guardian Signature _____

Please return completed forms to:

Temple Shalom
8401 Grubb Road
Chevy Chase, MD 20814