

**KOL HADASH HUMANISTIC CONGREGATION  
2010-2011 SUNDAY SCHOOL REGISTRATION FORM  
PLEASE RETURN BY AUGUST 10, 2010**

**Parents:**

Adult #1 \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Adult #2 \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

*(if different from above)*

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

**Students (K—10):**

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade for 10-11 \_\_\_\_\_

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade for 10-11 \_\_\_\_\_

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade for 10-11 \_\_\_\_\_

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade for 10-11 \_\_\_\_\_

**Pre-K students (year prior to Kindergarten);** PreK students meet monthly (see calendar):

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_

**Parent/Tot Program:**

Our parent/tot program is for children ages 0-3 and a parent or caregiver. The class is led by a parent and meets monthly; see school calendar.

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_

Child Enrolled \_\_\_\_\_ Birth Date \_\_\_\_\_

Are there any special conditions that teachers should be aware of (i.e. allergies; medications; physical, behavioral, or learning disabilities)? Does your child have an IEP (Individual Education Plan) or 504 Plan at his or her school? If so, please explain so that we may best meet your child's needs. Attach additional sheet if needed. You may also contact the Youth Education Director privately at [education@KolHadash.com](mailto:education@KolHadash.com). *Please include this information even if you have supplied it in previous years, especially noting any changes.*

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**Parent(s) must be members of Kol Hadash Humanistic Congregation to enroll children in Sunday School.  
YOUTH EDUCATION FEES DETAILED ON MEMBERSHIP DUES PAYMENT WORKSHEET**

*PLEASE COMPLETE BOTH SIDES*

## SUNDAY SCHOOL PERMISSIONS

\_\_\_ I give my permission to Kol Hadash to release my child's photo for publication as the Congregation deems appropriate. I also authorize the release of student and parent information to organizations with which KHHC is affiliated, such as the Society for Humanistic Judaism and JUF. Information is released so that families may be informed of educational opportunities for their children, receive Bar/Bat Mitzvah and Confirmation certificates, etc., not for fundraising purposes.

\_\_\_ I do not want Kol Hadash to release my child's photograph for publication.

\_\_\_ I do not want Kol Hadash to release student and parent information to affiliated organizations.

I certify that all information on this form is correct and complete. In case of emergency, I give school authorities permission to call the doctor named above and/or the local rescue squad. I give such individuals permission to take the necessary emergency measures. I agree to assume all responsibility and expenses incurred.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date

### KOL HADASH HUMANISTIC CONGREGATION SUNDAY SCHOOL FAMILY VOLUNTEER SIGN-UP

Our growing Sunday School is a cooperative one. We rely on the help of ALL parents and other interested persons. Thank you for your involvement.

Please return this form with your Sunday School registration.

	First Name	Last Name	Telephone	E-mail
Adult #1	_____	_____	_____	_____
Adult #2	_____	_____	_____	_____

**We ask each family to volunteer for at least one of the following:**

ADULT #1	#2	
___	___	Room parent
___	___	Classroom assistant (as needed)
___	___	Substitute teacher
___	___	Welcome Back/Meet the School Picnic (Sunday, August 29)
___	___	Sunday School First Day/Parent Coffee (Sunday, September 12)
___	___	Rosh Hashana Family Service Oneg (Thursday, September 9)
___	___	Sukkot celebration (Sunday, September 26)
___	___	Hanukkah luncheon (Sunday, December 5)
___	___	Tu B'Shevat Seder (Sunday, January 23)
___	___	Purim Carnival celebration (Sunday, March 20)
___	___	Passover School Seder (Sunday, April 10)
___	___	Last Day of School party (Sunday, May 22)
___	___	Anything you need (I'm flexible!)

Please note that families are also expected to help host the Shabbat service and oneg for their student's class Shabbat service. More information will come closer to the event.

*PLEASE COMPLETE BOTH SIDES - THANK YOU!*