

# SOUTH HUNTINGTON JEWISH CENTER

2600 NEW YORK AVE., MELVILLE, NY 11747 - (631) 421-3224

RABBI IAN S. JACKNIS

Spring 2020  
Dear Parents,

Religious School registration for children in Gan (K) through Hei (7<sup>th</sup> grade) for the 2020-21/5781 school year is now underway. Students entering the 3<sup>rd</sup> grade in public school in September 2020 must register for the Alef class in order to qualify for Bar/Bat Mitzvah.

While there is much uncertainty about how our program will run, due to the current global pandemic, please find peace in knowing that we will have a Religious School, though it may not look like our traditional program.

### Registration:

This registration process is critical to ensure your children are placed in optimal class sizes. It supports us in ensuring that we will have the best possible teachers placed at SHJC to enlighten your children next year, and enables us to give your child the best possible Religious School experience around!

### Tuition Payments:

At this moment, **we are not asking for a deposit.** We understand that we are living in a time of financial stress for many families, and therefore are asking for **your registration form without payment**, so that we can begin planning for next year.

Your first tuition payment must be received **BY AUGUST 15<sup>th</sup>**. If you have a financial hardship please contact [finance@shjc.org](mailto:finance@shjc.org) prior to August 15<sup>th</sup>.

ALL PAYMENTS SHOULD BE SENT IN BY AUGUST 15<sup>th</sup> ALONG WITH:

- Full payment of all outstanding synagogue and RS obligations
- Payment of: minimum of one-half of the RS tuition for the 2020-21 school year, one month of SHJC dues, and the \$75 per student book fee
- Parents of students in Kitah Hei will pay a \$55.00 graduation fee that will be added to your tuition bill

Tuition for Alef – Hei (3<sup>rd</sup> – 7<sup>th</sup> grades):  
 First student \$1095  
 Second student \$945  
 Third student \$745

Tuition for Gan, Simḥa 1 and Simḥa 2 (K-2nd grades)  
 Gan (K) \$395  
 Simḥa 1 \$495  
 Simḥa 2 \$495

Synagogue membership is not required to enroll your child in Gan, Simḥa 1 or Simḥa 2.

### Schedule of Religious School Classes for the 2020-2021 / 5781 School Year:

<b>Gan (Kindergarten):</b>	Thursdays from 4:30 - 6:30
<b>Simḥa 1 (1st grade):</b>	Thursdays from 4:30 - 6:30
<b>Simḥa 2 (2nd grade):</b>	Thursdays from 4:30 - 6:30
<b>Alef (3rd grade):</b>	Tuesdays and Thursdays from 4:30-6:30
<b>APP (3rd grade):</b>	Thursdays only from 4:30 - 6:30
<b>Bet (4th grade):</b>	Tuesdays and Thursdays from 4:30 - 6:30
<b>BPP (4th grade):</b>	Thursdays only from 4:30 - 6:30
<b>Gimel (5th grade):</b>	Tuesdays and Thursdays from 4:30 - 6:30 (Two days required)
<b>Dalet (6th grade):</b>	Tuesdays and Thursdays from 4:30 - 6:30 (Two days required)
<b>Hei (7th grade):</b>	Tuesdays and Thursdays from 6:35 - 8:00 (Two days required)

**Each class is subject to minimum and maximum enrollment**

For further information or questions, please call Principal Heather Welkes at (631) 421-3224 ext.12 or email [hwelkes@shjc.org](mailto:hwelkes@shjc.org). Emailing is preferable and will elicit a quicker response. We look forward to a joyous year of learning together!

Sincerely,

Heather Welkes, RS Principal

Gwen Lichtman, Synagogue President



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## Registration Form 2020-2021

Please list each child that you are registering on this form:

Last name \_\_\_\_\_

First name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Grade\* \_\_\_\_\_ Hebrew Names \_\_\_\_\_

First name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Grade\* \_\_\_\_\_ Hebrew Names \_\_\_\_\_

First name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Grade\* \_\_\_\_\_ Hebrew Names \_\_\_\_\_

First name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Grade\* \_\_\_\_\_ Hebrew Names \_\_\_\_\_

\*Grade entering as of September 2020

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip code \_\_\_\_\_

Phone numbers (please write in order of preference of contact, check which kind of number it is and identify which parent):

\_\_\_\_\_  home  cell  work Name: \_\_\_\_\_

\_\_\_\_\_  home  cell  work Name: \_\_\_\_\_

\_\_\_\_\_  home  cell  work Name: \_\_\_\_\_

Email address(es):

\_\_\_\_\_

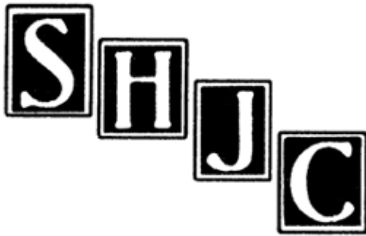
School District: \_\_\_\_\_

Parent/Guardian: English and Hebrew name \_\_\_\_\_

Parent/Guardian: English and Hebrew name \_\_\_\_\_

\_\_\_\_ Yes! I would like to help out/volunteer/join our PTA! Special skills? \_\_\_\_\_

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## EMERGENCY INFORMATION FORM 2020-2021

Name of Child #1: \_\_\_\_\_

Name of Child #2: \_\_\_\_\_

Name of Child #3: \_\_\_\_\_

Name of Child #4: \_\_\_\_\_

My child(ren) may be released to the following:

Please list anyone who may take your child home, including grandparents and babysitters.

Please indicate if there are any custody concerns that our staff should be made aware of.

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In the event of a medical emergency, I authorize the staff of SHJC to obtain emergency medical treatment for my child. I understand that I will be contacted immediately.

\_\_\_\_\_  
Parent's Name (Please Print)

\_\_\_\_\_  
Parent's Initials

\_\_\_\_\_  
Date

### Photo and Video Release

I give my permission to have photos and videos taken of my child(ren) at the SHJC Religious School and at school functions held outside the building. I am also giving the school permission to use these photos and videos for educational and publicity purposes. The photos and videos may appear in, but not be limited to, SHJC's website, marketing brochures, newspapers, YouTube, and publicity posters.

Yes, I give permission for photos of my child(ren) to be used.

No, I do not give permission for my child to be photographed.

Initials \_\_\_\_\_ Date \_\_\_\_\_



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**RELIGIOUS SCHOOL EDUCATIONAL PROFILE**

**2020-2021**

\*\*\*\*\* Student 1 \*\*\*\*\*

Name:

Does your child have any an IEP? yes no

Does your child have any special learning needs? yes no

Does your child receive accommodations? yes no

If yes, please explain:

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Does your child have allergies, dietary restrictions epipen asthma other

If yes, please explain:

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Any other information that may be helpful for us to know?

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\*\*\*\*\* Student 2 \*\*\*\*\*

Name:

Does your child have any an IEP? yes no

Does your child have any special learning needs? yes no

Does your child receive accommodations? yes no

If yes, please explain:

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Does your child have allergies, dietary restrictions epipen asthma other

If yes, please explain:

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Any other information that may be helpful for us to know?

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**RELIGIOUS SCHOOL EDUCATIONAL PROFILE**

**2020-2021**

\*\*\*\*\* Student 3 \*\*\*\*\*

Name:

Does your child have any an IEP? yes no

Does your child have any special learning needs? yes no

Does your child receive accommodations? yes no

If yes, please explain:

Does your child have allergies, dietary restrictions epipen asthma other

If yes, please explain:

Any other information that may be helpful for us to know?

\*\*\*\*\* Student 4 \*\*\*\*\*

Name:

Does your child have any an IEP? yes no

Does your child have any special learning needs? yes no

Does your child receive accommodations? yes no

If yes, please explain:

Does your child have allergies, dietary restrictions epipen asthma other

If yes, please explain:

Any other information that may be helpful for us to know?