

Melville Jewish Center

2600 New York Avenue
Melville, NY 11747
www.melvillejc.org



Rabbi Cara Weinstein Rosenthal

Jodi Nadler, Education Vice President
Ian S. Jacknis, Rabbi Emeritus
(631) 421-3224

Religious School Registration 2025-2026

S T U D E N T 1	Last name	First Name	Doctor's Name & Contact
	Hebrew Name	Birth Date	Medical Information (e.g. allergies, asthma, EpiPen, etc.)
	Student Email		Relevant Learning Concerns (e.g. IEP/504, ADD, etc.)
	Secular School	School Grade in 2025-26	

S T U D E N T 2	Last name	First Name	Doctor's Name & Contact
	Hebrew Name	Birth Date	Medical Information (e.g. allergies, asthma, EpiPen, etc.)
	Student Email		Relevant Learning Concerns (e.g. IEP/504, ADD, etc.)
	Secular School	School Grade in 2025-26	

S T U D E N T 3	Last name	First Name	Doctor's Name & Contact
	Hebrew Name	Birth Date	Medical Information (e.g. allergies, asthma, EpiPen, etc.)
	Student Email		Relevant Learning Concerns (e.g. IEP/504, ADD, etc.)
	Secular School	School Grade in 2025-26	

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Parent/Guardian 1		Parent/Guardian 2	
Last Name:	First Name:	Last Name:	First Name:
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:
Email:		Email:	
Address:		Address:	
Hebrew Name:		Hebrew Name:	

Emergency Contact (other than Parent/Guardian)			
Contact Name:	Relationship to student:	Contact Name:	Relationship to student:
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:

Tuition*		
Grade	Cost per year	Meeting Times
3 and 4 Year Olds	\$625.00 plus \$75.00 security fee	Tuesdays 3:30-4:30 pm
Kindergarten and 1st Grade	\$625.00 plus \$75.00 security fee	Tuesdays 4:00-5:30 pm
2nd and 3rd Grade	\$725.00 plus \$100.00 security fee	Tuesdays 4:30-6:30 pm
4th Grade to Bar/Bat Mitzvah age	\$1075.00 plus \$150.00 security fee	Flexible Class Times

*50% deposit fee is required at registration, which will be applied toward tuition. Full payment due before the first day of school. If you need assistance with financial issues, please email finance@melvillejc.org.

Please return this form by August 1. Payment can be submitted via Check, Cash or ShulCloud.

Signature of Parent or Guardian: _____ Date: _____

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CONSENT TO USE OF LIKENESS OF MINOR (By Parent Or Legal Guardian)

I, _____, residing at _____, hereby expressly GRANT to the MELVILLE JEWISH CENTER the right to use and publish the likeness of my son/daughter, _____, including photographs and images recorded in any medium, for the purpose of advertising and promoting the activities and programs of the MELVILLE JEWISH CENTER, including in E-Notices and on the website of the MELVILLE JEWISH CENTER. As used herein, "likeness" includes but is not limited to: photographs; silhouettes; and images made/preserved in film or by means of digital or electronic recording.

I hereby CONSENT to such publication and use of such photos/video recordings without any compensation whatsoever.

This Consent shall be broadly construed in favor of MELVILLE JEWISH CENTER, and I hereby agree to refrain from bringing suit or any other legal action against MELVILLE JEWISH CENTER, or any of Trustees, Officers, employees and agents, based upon any publication or use of any such photos/videos permitted by this Consent.

I hereby CERTIFY and REPRESENT to MELVILLE JEWISH CENTER, knowing that it will rely hereon, that I am the parent or legal guardian of _____, with full power to execute this CONSENT TO USE OF LIKENESS OF MINOR, and have read and fully understand the foregoing instrument and intend to be legally bound thereby.

Signature of Parent or Guardian: _____ Date: _____

Printed Name: _____