#### RELIGIOUS SCHOOL FAMILY INFORMATION

### STEPHEN WISE FREE SYNAGOGUE 2018-2019 SCHOOL YEAR

30 West 68th Street, New York, NY 10023 Phone: 212-877-4050 ext 230 Fax: 212-787-7108 E-mail: religiousschool@swfs.org Website: www.swfs.org

To enroll in the Religious School at Stephen Wise Free Synagogue, the student's legal guardian must be a member of the congregation. For membership information, please call our Membership Office at (212) 877-4050 ext. 223.

By email:

#### RETURNING THE REGISTRATION FORM

Forms can be returned by mail:

Please return the completed form and a non-refundable \$250 deposit per student as soon as possible. After August 1, we no longer guarantee friend requests.

**Religious School** religiousschool@swfs.org (212) 877-7108 Stephen Wise Free Synagogue 30 West 68<sup>th</sup> Street New York, NY 10023 **FAMILY INFORMATION** Adult 1 Full Name: \_\_\_\_\_\_ Street Address: \_\_\_\_\_ Work: Zip code: Cell: Home: Email: Adult 2 Full Name: \_\_\_\_\_ Street Address: \_\_\_\_\_ Cell: \_\_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_ Zip code: \_\_\_\_\_ Is there anything you would like us to know about your household? \_\_ STUDENT GENERAL INFORMATION Student 1 Full Name: \_\_\_\_\_ \_\_\_\_\_ Hebrew Name: \_\_\_\_\_ D/O/B: \_\_\_\_/\_\_\_ Gender: \_\_\_\_ Secular School: \_\_\_\_\_\_ Secular Grade Level: \_\_\_\_\_ \_\_\_\_(2)\_\_\_\_\_ Friend Requests: (1) Please describe any allergies or special medical conditions: Does your child carry or use an epi-pen? \_\_\_\_\_ Yes \_\_\_\_\_ No Does your child have any specific learning needs we should be aware of? Student 2 Full Name: Hebrew Name: D/O/B: \_\_\_\_ / \_\_\_ Gender: \_\_\_\_ Secular School: \_\_\_\_\_ Secular Grade Level: \_\_\_\_\_ \_\_\_\_\_(2)\_\_\_\_\_ Friend Requests: (1) Please describe any allergies or special medical conditions: Does your child carry or use an epi-pen? \_\_\_\_\_ Yes \_\_\_\_\_ No Does your child have any specific learning needs we should be aware of?

By fax:

# **RELIGIOUS SCHOOL FAMILY INFORMATION**

## STEPHEN WISE FREE SYNAGOGUE 2018-2019 SCHOOL YEAR

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Student 3 Full Name:		Hebrew Name: _	
D/O/B://	Gender: Secular Scho	ol:	Secular Grade Level:
		(2)	
Please describe any a	llergies or special medical con	ditions:	
Does your child carry	or use an epi-pen? Yes	No	
Does your child have	any specific learning needs we	e should be aware of?	
IN CASE OF AN EMER	GENCY		
If you are unable to be	e reached, please list adults, c	other than yourself, who we can	contact:
CONTACT PERSO	ON PHON	IE	RELATIONSHIP
PHYSICIAN INFORMA		20000 2000	
PI	HYSICIAN NAME	DOCTOR PHONE	
physician/hospital sel	ected by the staff member in	ched, I hereby give permission for charge. Please initial:	or my child to be treated by the
Other than with		ara allowed to Jeave Poligious S	chool with the following adults:
			cionship:
			cionship:
			cionship:
		nission to leave unaccompanied	
	· · · · ·	g my child to dismiss from the p	•
vehicle:	,	,	,
	(2)	(3)	
PERMISSION TO SHAI	RE		
We often take photo:	s and video during Religious	School. If you <b>AUTHORIZE</b> Step	hen Wise Free Synagogue to use
photographs and reco	ordings of your child on our w	vebsite, in print materials, and o	other media for the promotion of
and public education	about our programs, initial he	ere: Please note: we will i	not identify any student by name.
For Sixth and Seventh	Grade Families: We encourag	ge our students to invite their er	ntire class to their Bnai Mitzvah. If
you <b>DO NOT</b> want you	ur name, email and mailing ac	dresses released for this purpo	se, please initial here: 

tudent 1 Full Name:
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GRADE LEVEL (SELECT ONE)	PROGRAM (SELECT ONE)	EARLY BIRD TUITION	TUITION	MATERIALS & SNACK	
		(BEFORE JULY 1, 2018)	(ON OR AFTER JULY 1, 2018)	FEE	
Taste of Religious School (Pre-K)	Sundays, twice a month, 9:00a-11:00a	N/A	\$1,000	\$175	
Kindergarten	Sundays, 9:00a-11:00a Tuesdays, 4:00p-6:00p	\$1,600	\$1,650	\$175	
First Grade Second Grade	Sundays, 9:00a-11:00a Tuesdays, 4:00p-6:00p	\$1,700	\$1,750	\$175	
Third Grade Fourth Grade	Sundays, 9:00a-11:30a Mondays, 4:00p-6:30p	\$2,250	\$2,320	\$175	
Fifth Grade	Sundays, 9:00a-11:30a Mondays, 4:00p-6:30p	\$2,300	\$2,370	\$175	
Sixth Grade	Sundays, 11:00a-1:00p Wednesdays, 4:00p-6:00p	\$2,200	\$2,260	\$175	
Seventh Grade	Sundays, 11:00a-1:00p Wednesdays, 4:00p-6:00p	\$1,900	\$1,960	\$175	
Portals	Third Grade Fourth Grade Fifth Grade	N/A	\$3,000	\$175	
	Sixth Grade Seventh Grade				
ADDITIONAL PROGRAMMING (Must be enrolled in RS to participate)					
Ulpan Katan: Hebrew Exposure (Grades 3-5)	Tuesdays, 4:00p-5:00p	N/A	\$500	N/A	
Independent Study with Clergy (Grade 3-7)	30 min. session, once a month, with a member of clergy	N/A	N/A	\$180	
ADDITIONAL FEES & CONTRIBUTIONS					
Weekday Walking Service	(SCHOOL:) ECFS PS 87 PS 199 (DAY:) MON	TUES WED	\$300		
Support Our School! Tuition partially cov	partially covers the cost of our RS. We encourage families to give a voluntary, tax-deductible contribution. \$300. Or write in alternate amount here: \$			nount here: \$	
Teacher Gift Fund Help us thank our te	reachers with holiday and end-of-the-year gifts with this voluntary donation. \$36. Or write in alternate amount here: \$			ount here: \$	
	(.	ADMIN ONLY) S1 TOTAL:	\$		

Student 2 Full Name:

GRADE LEVEL (SELECT ONE)	PROGRAM (SELECT ONE)	EARLY BIRD TUITION	TUITION	MATERIALS & SNACK	
		(BEFORE JULY 1, 2018)	(ON OR AFTER JULY 1, 2018)	FEE	
Taste of Religious School (Pre-K)	Sundays, twice a month, 9:00a-11:00a	N/A	\$1,000	\$175	
Kindergarten	Sundays, 9:00a-11:00a Tuesdays, 4:00p-6:00p	\$1,600	\$1,650	\$175	
First Grade Second Grade	Sundays, 9:00a-11:00a Tuesdays, 4:00p-6:00p	\$1,700	\$1,750	\$175	
Third Grade Fourth Grade	Sundays, 9:00a-11:30a Mondays, 4:00p-6:30p	\$2,250	\$2,320	\$175	
Fifth Grade	Sundays, 9:00a-11:30a Mondays, 4:00p-6:30p	\$2,300	\$2,370	\$175	
Sixth Grade	Sundays, 11:00a-1:00p Wednesdays, 4:00p-6:00p	\$2,200	\$2,260	\$175	
Seventh Grade	Sundays, 11:00a-1:00p Wednesdays, 4:00p-6:00p	\$1,900	\$1,960	\$175	
Portals	Third Grade Fourth Grade Fifth Grade	N/A	\$3,000	\$175	
	Sixth Grade Seventh Grade				
ADDITIONAL PROGRAMMING (Must be enrolled in	RS to participate)				
Ulpan Katan: Hebrew Exposure (Grades 3-5)	Tuesdays, 4:00p-5:00p	N/A	\$500	N/A	
Independent Study with Clergy (Grade 3-7)	30 min. session, once a month, with a member of clergy	N/A	N/A	\$180	
ADDITIONAL FEES & CONTRIBUTIONS					
Weekday Walking Service	(SCHOOL:) ECFS PS 87 PS 199 (DAY:) MON	TUES WED	\$300		
Support Our School! Tuition partially co	partially covers the cost of our RS. We encourage families to give a voluntary, tax-deductible contribution. \$300. Or write in alternate amount here: \$			nount here: \$	
Teacher Gift Fund Help us thank our	eachers with holiday and end-of-the-year gifts with this voluntary donation. \$36. Or write in alternate amount here: \$			ount here: \$	
	(.	ADMIN ONLY) S2 TOTAL:	\$		



Student 3 Full Name:	
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GRADE LEVEL (SELECT ONE)		PROGRAM (SELECT ONE)		EARLY BIRD TUITION	TUITION	MATERIALS & SNACK
				(BEFORE JULY 1, 2018)	(ON OR AFTER JULY 1, 2018)	FEE
Taste of Religious School (Pre-	-K)	Sundays, twice a month, 9	00a-11:00a	N/A	\$1,000	\$175
Kindergarten		Sundays, 9:00a-11:00a	Tuesdays, 4:00p-6:00p	\$1,600	\$1,650	\$175
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Seventh Grade		Sundays, 11:00a-1:00p	Wednesdays, 4:00p-6:	00p \$1,900	\$1,960	\$175
Portals		Third Grade Fourt	h Grade Fifth Grad	de N/A	\$3,000	\$175
		Sixth Grade Sever	th Grade			
ADDITIONAL PROGRAMMING (Must be enrolled in RS to participate)						
Ulpan Katan: Hebrew Exposur	re (Grades 3-5)	Tuesdays, 4:00p-5:00p		N/A	\$500	N/A
Independent Study with Clerg	y (Grade 3-7)	30 min. session, once a mo	nth, with a member of cle	rgy N/A	N/A	\$180
ADDITIONAL FEES & CONTRIBUTIONS						
Weekday Walking Service		(SCHOOL:) ECFS PS 87	PS 199 <b>(DAY:)</b>	MON TUES WED	\$300	
Support Our School! Tuit	tion partially cove	overs the cost of our RS. We encourage families to give a voluntary, tax-deductible contribution			\$300. Or write in alternate a	mount here: \$
Teacher Gift Fund Help	o us thank our ted	chers with holiday and end-of-the-year gifts with this voluntary donation.			\$36. Or write in alternate amount here:\$	
				(ADMIN ONLY) S3 TOTAL:	\$	

(ADMIN CIVEL) I WILLING TOTAL JOI NELIGIOUS SCHOOL	(ADMIN ONLY) Famil	y Total fo	r Religious School:	
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Please sign here to indicate that all of the above information is accurate and complete.

New York, NY 10023

Print Full Name:		
Signature:		
Date://		
*A \$250 deposit must be made to rese	erve your spot in the SWFS Religious	School. Families will b
billed the remaining tuition.		
RETURNING THE REGISTRATION FORM		
Please return the completed form and	l a non-refundable \$250 deposit per studen	t as soon as possible.
• •	we no longer guarantee friend requests.	•
Forms can be returned by mail:	By email:	By fax:
Religious School	religiousschool@swfs.org	(212) 877-7108
Stephen Wise Free Synagogue		
30 West 68 <sup>th</sup> Street		