

RELIGIOUS SCHOOL ENROLLMENT FORM

NOTE: IF YOUR CHILD IS CURRENTLY ENROLLED YOU DO NOT NEED TO COMPLETE THIS FORM AGAIN

Temple Beth-El
118 South Grand Avenue
Poughkeepsie, NY 12603

CHILD'S ENGLISH NAME _____

CHILD'S HEBREW NAME _____

CHILD'S BIRTH DATE _____

ENTERING GRADE _____ NAME OF PUBLIC SCHOOL _____

SIBLINGS:

<u>NAME</u>	<u>HEBREW</u>	<u>BIRTH DATE</u>	<u>GRADE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDRESS _____

FATHER'S NAME _____

FATHER'S HEBREW NAME _____

MOTHER'S NAME _____

MOTHER'S HEBREW NAME _____

TELEPHONE HOME # _____ WORK# _____

CELL # _____

EMERGENCY NAME & PHONE # _____

E-MAIL ADDRESS _____