

Describe any physical or learning disabilities which might affect the student's performance or participation, (i.e., vision, hearing, speech, reading, or perceptual): _____

Describe any prescription which the student takes regularly: _____

Explain: _____

List any allergies: _____

Describe any family arrangements that might affect the student's attendance: _____

MEDICAL INSURANCE: _____ POLICY #: _____

DOCTOR'S NAME: _____ PHONE #: _____

IF THE PARENT, GUARDIAN OR PHYSICIAN CANNOT BE REACHED, WHAT ACTION SHOULD BE TAKEN?

CALL EMERGENCY HOSPITAL: (_____) YES (_____) NO

OTHER: (SPECIFY): _____

The undersigned, legal custodian of _____, a minor, hereby authorizes the Director or designee, into whose care the aforementioned minor pupil has been entrusted, to consent to any X-ray examination, anesthetic, medical or surgical diagnosis, treatment, and/or hospital care to be rendered to said minor upon the advice of any licensed physician or dentist.

It is understood that this authorization is given in advance of any required diagnosis, treatment or hospital care and provides authority and power to the aforementioned agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which a licensed physician or dentist may deem necessary.

The undersigned hereby agrees to defend, indemnify, and hold harmless Temple Adat Elohim and its officers, employees and agents from any and against all loss, liability charges, and expenses (including attorney fees and costs which may arise by reason of participation in any program). Temple Adat Elohim does not provide accident, medical, liability, or workers compensation insurance for program participants. I further understand that all costs of paramedic transportation, hospitalization and any examination, X-ray, or treatment provided in relation to this authorization shall be born by the undersigned.

Parent Signature

Date

Print name and relationship to student

By checking this box it is as if I have signed this by hand, and this is my official signature.

TEMPLE ADAT ELOHIM RELIGIOUS SCHOOL

CODE OF CONDUCT

We are committed to offering our students a quality Jewish Education. To this end, we have adopted the following policy, which applies to every individual in our school. It is our sincere hope that each student will experience a rewarding education in a positive, productive learning environment. **Please review this policy with your child(ren), sign it and return it with your Registration Forms.** Thank You.

1. **In accordance with the policy of Temple Adat Elohim, a student must complete four years of Hebrew School (grades 4 and higher) and is obligated to complete the 7th grade year of Religious School. In addition, we encourage all students to continue their Jewish Education through Confirmation.**
2. **Attendance in school is vital to the success of the student's progress. A student missing more than 25% of sessions during the school year may not be promoted to the next grade level.**
3. **Students will be required to complete assignments missed during absences.**
4. **Behavioral problems are detrimental to the learning environment. Every effort will be made to resolve the situation in the classroom. If a child continues to have behavioral problems and must be sent out of class, the following will occur:**

FIRST TIME – the student will be spoken with and returned to class at the discretion of the Director of Education.

SECOND TIME – the student will be spoken with and the Director of Education will discuss the situation with their parents and a written summary will be included in the students' cumulative file.

THIRD TIME – the student will be spoken with and a conference will be scheduled with the parents in an attempt to resolve the situation before the student is allowed to return to class.

FOURTH TIME – the student will be suspended and will not be allowed to return to class until a second conference takes place. The Director of Education, at this point, has the authority to decide when and if the student will return to class.

FIFTH TIME – if the behavior does not change the student will be expelled for the remainder of the school year by a committee consisting of the Director of Education, Assistant Director, Rabbi and Vice President of Education.

The student's return to school the following year will be at the discretion of the school. At this point the Bar/Bat Mitzvah date will be postponed or canceled.

5. **Students will be on their best behavior at all times, apply themselves to the best of their abilities, be prompt to class, and complete assigned work in a timely manner. Students must remain in designated supervised areas on Temple grounds.**
6. **Students will follow the directions of the person in charge at all times.**
7. **Students will care for their texts, materials, and school and personal property. Any damage done will be the financial responsibility of the family. Parents must pay said cost before re-enrollment or Bar/Bat Mitzvah.**

8. **Fighting, foul language and violent acts will not be tolerated.**
9. **The school does not tolerate the use or possession of weapons or drugs, other than those drugs prescribed by a physician, which must be held in the Religious School office. If a student is in possession of drugs, alcohol, cigarettes or weapons the result is an immediate expulsion from the school program and Bar/Bat Mitzvah privileges shall be revoked. This policy is one of strict compliance. No exceptions will be made.**

We have read the Code of Conduct and will adhere to its terms:

_____	_____
Guardian's Name	Guardian's Name
_____	_____
Student's Name	Student's Name
_____	_____
Student's Name	Student's Name

- By checking this box it is as if I have signed this by hand, and this is my official signature.