

April 2022

Dear Parents,

The 2021-2022 Religious School was fabulous! We held classes in person, by Zoom and hybrid, adapting to the needs of our families as they came up and always keeping the health and safety of our students, teachers and staff at the forefront of our decisions. We are looking forward to a meaningful and exciting 2022-2023 school year with all of you, including new engaging curricula for all of our grades and “Celebration Circles” for our Kindergarten and First grade classes.

In order to provide a better learning experience, we are returning to our pre-pandemic hours by extending our in-class time by 30 minutes (for kindergarten-6<sup>th</sup> grade) to give our students and teachers more time to learn and explore. We believe that an extended learning pace will benefit everyone, allowing for more student/teacher interaction and reinforcement.

**For your convenience, this year’s registration forms are fully online for all students. Please update your information on our temple’s database using the log-in instructions below.** If you encounter any issues online, please do not hesitate to contact Heidi at [hsegal@adatelohim.com](mailto:hsegal@adatelohim.com). Please be sure to fill out and submit the Student’s Code of Conduct with your other forms.

When forms are submitted, you will receive a confirmation email. Your Temple Adat Elohim account must be current in order to register.

If you have any questions, please feel free to reach out to me at [rshaw@adatelohim.com](mailto:rshaw@adatelohim.com) or Heidi at [hsegal@adatelohim.com](mailto:hsegal@adatelohim.com). We look forward to continuing our partnership with you in your family’s Jewish learning journey.

Sincerely,

*Reesa Shaw*

Reesa Shaw  
Religious School Principal

GRADE	DAY	HOURS	YEARLY
Kindergarten - 3 <sup>rd</sup>	Sundays	9:00-11:30am	\$985
4 <sup>th</sup> – 6 <sup>th</sup>	Sundays or Wednesdays	9:00am-12:00pm or 4:00-7:00pm	\$1,185
7 <sup>th</sup> & Private Tutorial	Tuesday Evening	6:30-8:00pm	\$2,250
Bar & Bat Mitzvah Facility Set Up			\$330
8 <sup>th</sup> & 9 <sup>th</sup>	Tuesday Evening	6:30-8:00pm	\$985
Confirmation (10 <sup>th</sup> )	Tuesday Evening	6:30-8:00pm	\$985
Confirmation Fee			\$150
Sunday Night Live (11 <sup>th</sup> & 12 <sup>th</sup> )	Sunday Evening	6:00-7:30pm	\$965

\*Pending Approval by TAE Board

# Registration for the 2022-2023 school year is available ***FULLY ONLINE!***

**Follow these steps. It is so simple!**

1. Go to [www.AdatElohim.org](http://www.AdatElohim.org).
2. Click on Partner Login (on the upper right-hand side) and enter you email address and password. If you forgot your password or do not know it, select “Forgot Password”, and follow the instructions to reset it.
3. Click on “My Account.”
4. Click on the “My Enrollments” box.
5. Click on “Enroll Now.”
6. Read through our letter and select the grades for your child(ren).
7. Update your information carefully and when finished select “Complete Enrollment.”
8. You should receive an automated email confirmation letting you know that enrollment has been submitted successfully.

Please do not hesitate to email Reesa or Heidi should you have any questions  
[rshaw@adatelohim.com](mailto:rshaw@adatelohim.com) or [hsegal@adatelohim.com](mailto:hsegal@adatelohim.com).

**TEMPLE ADAT ELOHIM RELIGIOUS SCHOOL  
EMERGENCY INFORMATION**

ONE FORM **PER STUDENT** MUST BE SUBMITTED WITH YOUR SIGNED CODE OF CONDUCT  
PLEASE MAKE SURE TO COMPLETE EVERY SECTION

**STUDENT'S NAME** \_\_\_\_\_ **BIRTHDATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

**PARENT/GUARDIAN NAME** \_\_\_\_\_ **PARENT/GUARDIAN NAME** \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

In case of divorce/separation, should both parents receive communication from us?  Yes  No

\_\_\_\_\_ Grade and teacher in Religious School (**2021-2022**): \_\_\_\_\_

INCOMING SECULAR GRADE 2022/2023

\_\_\_\_\_ STUDENT'S HEBREW NAME (If known)

\_\_\_\_\_ BAR/BAT MITZVAH DATE (If known)

\_\_\_\_\_  
FRIEND REQUEST (WE CAN ONLY CONSIDER THE FIRST TWO NAMES LISTED)

**EMERGENCY CONTACT INFORMATION:** If you are unable to reach me during any emergency, you are authorized to contact and, if necessary, to release my student to the following relative or neighbor: (STUDENT WILL NOT BE RELEASED TO ANYONE WHO IS NOT LISTED.)

\_\_\_\_\_  
NAME RELATIONSHIP CELL PHONE

\_\_\_\_\_  
NAME RELATIONSHIP CELL PHONE

\_\_\_\_\_  
NAME RELATIONSHIP CELL PHONE

I give permission for my child's image to be used on the TAE website, Facebook page, and email blasts:

Yes  No

What special learning accommodations does your child have at secular school?

**PLEASE NOTE AS THIS IS IMPORTANT INFORMATION FOR TEACHERS**

Describe any prescription which the student takes regularly: \_\_\_\_\_

Explain: \_\_\_\_\_

List any allergies that may affect your child at Religious School:

\_\_\_\_\_

Describe any **family arrangements the teacher should know** that might affect your child's progress:

\_\_\_\_\_

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 borne by the undersigned.

\_\_\_\_\_  
Print name and relationship to student (Electronic Signature)

\_\_\_\_\_  
Parent/Guardian Signature (Electronic Signature)

**TEMPLE ADAT ELOHIM RELIGIOUS SCHOOL  
EMERGENCY INFORMATION**

ONE FORM PER STUDENT MUST BE SUBMITTED WITH YOUR SIGNED CODE OF CONDUCT  
PLEASE MAKE SURE TO COMPLETE EVERY SECTION

**STUDENT'S NAME** \_\_\_\_\_ **BIRTHDATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

**PARENT/GUARDIAN NAME** \_\_\_\_\_ **PARENT/GUARDIAN NAME** \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

In case of divorce/separation, should both parents receive communication from us?  Yes  No

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\_\_\_\_\_ BAR/BAT MITZVAH DATE (If known)

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Explain: \_\_\_\_\_

List any allergies the may affect your child at Religious School:

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Describe any **family arrangements the teacher should know** that might affect your child's progress:

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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 borne by the undersigned.

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Print name and relationship to student (Electronic Signature)

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Parent/Guardian Signature (Electronic 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 and submit with your Emergency Contact 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 7<sup>th</sup> grade year of Religious School. In addition, we strongly 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 without having a tutoring fee incurred for private summer tutoring to achieve grade level competency.
3. Students will be required to complete assignments missed during absences.
4. We use the following principles for addressing student behavior:
  - Students may take part in classroom and extra-curricular activities if they are not causing a problem for other students, teachers, or madrichim. (use or possession of a weapon or drugs presents a problem within the school.)
  - Students should experience the natural consequences, both positive and negative, of their behavior.
  - We cherish and value our students even when they make mistakes.
  - Students learn and gain self-esteem, in part, by making and then repairing their mistakes.
5. Students must remain in designated supervised areas on Temple grounds and/or to be on camera during any virtual session.

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

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Name