

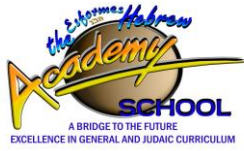
## Esformes Hebrew Academy Additional Registration Forms

### Photography Release

I give my permission for (list all students) \_\_\_\_\_ to be photographed and/or videotaped while participating in events/activities hosted by Esformes Hebrew Academy.

These photographs will only be used for purpose of documentation, creative projects, or publicizing the Esformes Hebrew Academy. Photos and videos may be used on our website.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



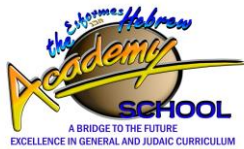
## Emergency Transportation & Treatment Authorization

### **Permission to Transport and Secure Treatment:**

In the event I cannot be reached to make arrangements for emergency medical or dental care for my child, I grant permission for my child(ren) to be taken to the nearest hospital or medical/dental facility for treatment for any accident or illness that the School feels needs immediate medical attention.

I accept liability for all expenses incurred.

\_\_\_\_\_ Date \_\_\_\_\_  
(Signature of parent/guardian)



# Arrival & Dismissal of Students from School

**Arrival**

For the safety of your students, please indicate how your children will usually arrive to school. Students are to arrive between **7:55 am to 8:10 am**.

Will your child walk or ride their bike alone to school? Yes \_\_\_\_\_ No \_\_\_\_\_

**Dismissal:** Parents are expected to be in the carpool line by **4:00 p.m.** All dismissal changes must be placed on the Dismissal Change voicemail system for EHA. (follow instructions on automated message)

My child is allowed to walk/bike home alone. Yes \_\_\_\_\_ No \_\_\_\_\_

**Chronically Late Parents**, parents who consistently arrive after 4:10 p.m., **will be charged \$10.00 for the first five (5) minutes and then \$2.00 for each consecutive minute.**

This late fee will be charged to your credit card on file on a monthly basis.

## **Non-Parent Pick Up**

If people *other than the child's parents* have permission to pick up your child, please complete the form below. In the event of an emergency school closure or other event, your children may be allowed to go with any of the listed people. If for some reason you will not be home, your child will be kept at the home of this designated person.

The School must be *notified by 3:15 p.m.* when you have made arrangements to have your child picked up by someone other than the parents.

Person who has permission to pick up your child:  
Name:  
Phone:  
Address:

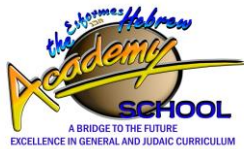
Person who has permission to pick up your child:  
Name:  
Phone:  
Address:

Person who has permission to pick up your child:  
Name:  
Phone:  
Address:

Person who has permission to pick up your child:  
Name:  
Phone:  
Address:

*I have read and understand the arrival policy, late dismissal fee, and non-parent pick up policies.*

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Communication Preference Form

Please check one:

I would like to receive mailings **by email only**. I check my e-mail regularly. My e-mail address is below.

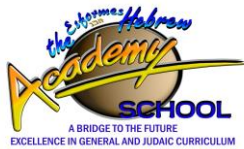
I would like to receive paper **and** digital mailings. Please send school information to the following e-mail address(es)

Primary Email: \_\_\_\_\_@\_\_\_\_\_

Secondary Email: \_\_\_\_\_@\_\_\_\_\_

I would not like to be (or am not able to be) contacted via e-mail.

Please note that the Esformes Hebrew Academy PTO Facebook page (<https://www.facebook.com/groups/116539221741666/>) and our website ([www.esformeshebrewacademy.org](http://www.esformeshebrewacademy.org)) are updated with information and useful forms frequently.



## Tuition & Fee Payment Agreement

### Tuition

Tuition for your child(ren) is \$695.00/per child and is for 10 months. Tuition will be due on the first (1<sup>st</sup>) of each month regardless of holidays, sick days, or shortened month and may be paid as follows. Please choose from one of the following:

\_\_\_\_\_ Single Payment for all 10 months (total of \$6950.00) Preschool-8<sup>th</sup> Grade or (total of \$10,000) 9<sup>th</sup> Grade

\_\_\_\_\_ 10 Monthly Post-Dated Checks (**dated for the 1<sup>st</sup> of each month**) **PLUS**, we will need a Credit Card Number (**no debit cards**) on file for any payment not made by the 1<sup>st</sup> of the month (either by check or cash) or any check returned because of insufficient funds.

\_\_\_\_\_ Credit Card Payment to be deducted on the 1<sup>st</sup> of the month

\_\_\_\_\_ Credit Card Number

\_\_\_\_\_ Expiration Date Mo/Yr

\_\_\_\_\_ Cardholder's name

*\*For parents who wish to pay cash in lieu of using a check or credit card, **the cash has to be in office no later than 2:00 pm on the first of the month when tuition is due.** If the 1st falls on a weekend, cash has to be in the office on the Monday immediately following. A 3% surcharge will be added to all credit card payments. NO cash will be accepted after 2 pm on the first of the month. **NO exceptions will be made.***

*\*Any check returned NSF or Credit Card payment declined will be charged an additional \$35.00 fee.*

*\*Any check not paid by the 1st of the month will be charged a \$25.00 late fee.*

### Fees

The Book and Supply Fee allows the school to provide curriculum materials (textbooks, workbooks, etc) and supplies to the students. You will receive a supply list that you are responsible for, and the rest of the supplies will be provided by the school.

The Book and Supply Fee will be \$150 per student in Preschool, and \$300 per student in Kindergarten through Eighth Grade. Ninth grade fees are \$400.00 for each.

In lieu of required service hours, each family will pay a \$200.00 Building Fund Fee per family for PS-Ninth grade. This fee is due at time of registration.

\_\_\_\_\_ Parent Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Parent Signature

\_\_\_\_\_ Date

**\*\*Reminder:** An **ADMITTANCE PASS** will be issued when all past due payments, checks and credit card number has been received and all forms have been signed and returned. No child will be allowed into class on the first day of school without an Admittance Pass.