



Magen David Sephardic Congregation

11215 Woodglen Drive

Rockville, MD 20852

301-770-6818

office@magendavidsephardic.org

ROOTS YOUTH PROGRAM REGISTRATION FORM

2015/16-5776

STUDENT 1

Student's Name _____ Hebrew Name _____

Date of Birth ____/____/____ Age _____ Grade _____

STUDENT 2

Student's Name _____ Hebrew Name _____

Date of Birth ____/____/____ Age _____ Grade _____

STUDENT 3

Student's Name _____ Hebrew Name _____

Date of Birth ____/____/____ Age _____ Grade _____

FAMILY INFORMATION

Home Address _____
Street _____

City _____ State _____ Zip _____ Home Phone _____

NOTE: In the event of an unexpected cancellation, we will notify you by email.

For weather related school closings, we will follow the Montgomery County Public School policy.

(PLEASE PRINT ALL INFORMATION)

Father's Name _____ Mother's Name _____

Work phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Email _____ Email _____

MEDICAL INFORMATION (Confidential)

Are there any medical conditions, allergies, or other pertinent information regarding your child that we should be aware of?

EMERGENCY CONTACT INFORMATION

Name	Phone number	Relationship
------	--------------	--------------

In the event of an emergency and I cannot be reached, I give permission for my child to be transported to the nearest medical facility and specifically authorize a representative of MDSC to select a physician and/or authorize medical treatment, including hospitalization, anesthesia, injection, surgery, or other measures which he/she feels are in the best interest of my child.

Parent's initials_____

I understand that photographs of my child(ren) may be used in school information or displays and/or in congregational publications, in print and/or electronically, at the discretion of the Rabbi and MDSC Board of Directors.

Parent's initials_____

TUITION & PAYMENT INFORMATION

\$700 per student, \$650 for a second child, \$550 for a third child.
Scholarships and other discounts are available. Please contact Rabbi Ovadia for details.

Parent's Signature_____

Date_____