NEW Young Family Initiative (effective 9/9/19):
Families with a member 45 years old or younger can join WRJC at an annual membership rate of $400/year for three years. This membership rate entitles families to **ALL** WRJC events, including but not limited to high holidays, Shabbat services, Passover Seder, Chanukah Party, annual picnic, Woman’s lunch, Sukkot, and Sunday School/BBMP.

After three years, the membership fee will increase to $600/year and subsequent years will revert back to the typical WRJC membership rate of $800/year.

Sunday School (SS), Grade K-4th, meets twice a month at the WRJC office unless otherwise specified
Bar/Bat Mitzvah Prep (BBMP), Grade 5-7th, meets twice a month unless otherwise specified

Click on the following link for the SS/BBMP 2019/20 Schedule:
https://docs.google.com/document/d/1GHuasqLzUog6GhNRBZngwVYtMkRets3IB4h8_xe8g-A/edit?usp=sharing

* Security will be provided at all WRJC classes

Name of Student #1:__________________________________________________________
Age_____________Date of Birth_______________Grade as of September 2019__________
Allergies/Medical issues______________________________________________________
Special needs you would like us to know ________________________________________
__________________________________________________________________________

Name of Student #2:__________________________________________________________
Age___________Date of Birth________________Grade as of September 2019____________
Allergies/ Medical issues______________________________________________________________________________
Special needs you would like us to know_________________________________________________________________
__________________________________________________________________________
Name of Student #3: __________________________________________________________

Age ______ Date of Birth ___________ Grade as of September 2019 ___________

Allergies/Medical issues ____________________________________________________

Special needs you would like us to know ______________________________________

__________________________________________________________________________

Student(s) prior religious school experience:

_______________________________________________________________________

Parent/guardian name: _______________________________________________________

Phone_____________________________________________________________________

Address________________________________________Email_______________________

Parent/guardian name: _______________________________________________________

Phone_____________________________________________________________________

Address________________________________________Email_______________________

Emergency Contact (if we cannot reach either parent) __________________________

Relationship_________________________Phone______________________________

I, _______________________________________________________________________

parent/guardian of__________________________________________________________

A minor, hereby consent and authorize the WRJC to make and reproduce audio/video

recordings and/or photographs of my child during the school year. These most often are used

for display within the school setting by may be used as teaching tools or for advertising and

promotion of our program via WRJC website, email, and/or private social media platform.

Parent/guardian signature________________________________________ Date:___________