



HAR ZION
T E M P L E

Har Zion Temple
1500 Hagys Ford Road, Penn Valley, PA 19072 610-667-5000

YOUTH REGISTRATION 2010-2011

Name _____ Grade _____ Birthday _____
Address _____ Home Phone _____
_____ Parent Line _____
Cell Phone _____
Email Address _____ Parent Cell _____

Are you a member of Har Zion Temple? _____

Does your child attend HZT Religious School _____

If not, where do you belong? _____ If not, where does your child attend? _____

MEDICAL INFORMATION AND EMERGENCY MEDICAL RELEASE

Family Physician _____

Address _____ Phone _____

Name of another person other than parent who can be called in case of emergency:

Name Address Relationship Phone

Mobile Phone Health Insurance Company Policy #

The Jane Fishman Grinberg Religious School adheres to the health policies governing the Lower Merion School District; therefore, they do not dispense medication. In case of first aid, however, **we give the school permission to administer minor first aid remedies should the need arise.** (However, in all instances, the school will do its best to reach parents.)

In the event of an emergency and the individual listed above cannot be reached, we give permission for our child to be treated in the Emergency Room of the nearest hospital.

Please Sign

Date

Please enclose a check for \$55.00 made out to Har Zion Temple for Youth membership dues and either bring it to the school office, give it to Amy Shepherd, or mail it to Har Zion Temple, 1500 Hagys Ford Road, Penn Valley, PA. 19072, attn: Youth.