



## **HEBREW SCHOOL AT TEMPLE EMANU-EL**

**2020 ~2021**

**5781**

### **LEARN ONLINE!**

- Hebrew Blessings
- Stories of the Torah
- Alef-Bet
- Jewish Holidays
- Songs
- Discussions: Jewish Values

### **Multi-layered Jewish Education:**

#### **When does learning happen?**

It happens every Wednesday, online.

#### **How does learning happen?**

Highly fun and interactive sessions with a detailed curriculum, focusing on the Torah narrative, Hebrew letter recognition, Blessings, Music, Jewish Holidays and storytelling with discussion on Jewish values.

Tutorial videos produced by Temple Emanu-El.

## SCHEDULE

### September

**9 First day**

16

23

30

### December

2

9

16

**23 No Hebrew School**

**30 No Hebrew School**

### March

3

10

17

24

**31 No Hebrew School**

### October

7

14

21

28

### January

6

13

20

27

### April

7

14

21

28

### November

4

11

18

**25 No Hebrew School**

### February

3

10

**17 No Hebrew School**

24

### May

5

**12 Last Day**

# Temple Emanu-El Hebrew School

2020/21

5781

## Registration

Student's First Name: \_\_\_\_\_

Student's Last Name: \_\_\_\_\_

Student's Hebrew Name: \_\_\_\_\_

Student's Birth Date: \_\_\_\_\_

Gender: Male \_\_\_ Female \_\_\_

Name of Secular School in 2020/21: \_\_\_\_\_

Grade in Secular School in 2020/2021: \_\_\_\_\_

Parent/Guardian 1

Parent/Guardian 2 (please only include information which is different from parent/guardian 1)

Name: \_\_\_\_\_

\_\_\_\_\_

Hebrew Name: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/Zip code: \_\_\_\_\_

\_\_\_\_\_

Day/Work Phone: \_\_\_\_\_

\_\_\_\_\_

Evening Phone: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Cell: \_\_\_\_\_

\_\_\_\_\_

If parents/guardians live in separate households, student lives with:

Both parents/guardians \_\_\_ Parent/guardian 1 only \_\_\_ Parent/guardian 2 only \_\_\_

If parents/guardians live in separate households, send mail or e-mail to:

Both parents/guardians \_\_\_ Parent/guardian 1 only \_\_\_ Parent/guardian 2 only \_\_\_

**Something Wonderful Happens to Jewish Children Here!**

# Temple Emanu-El Hebrew School

2020/21

5781

## Medical and Emergency Information

Student's Name (First and Last): \_\_\_\_\_

Please inform us of any allergies or medical conditions: \_\_\_\_\_

Please inform us of any dietary needs: \_\_\_\_\_

Please inform us of all medications your child takes that may impact your child during Hebrew School hours:

May we contact your child's doctor or dentist in case of emergency? Yes \_\_\_ No \_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Emergency Contacts.

If both parents/guardians are unreachable, please provide us with two emergency contacts:

Name/relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Name/relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**Something Wonderful Happens to Jewish Children Here!**

# Temple Emanu-El Hebrew School

2020/2021

5781

## Payment

Parent/guardian 1: \_\_\_\_\_

Parent/guardian 2: \_\_\_\_\_

2020/2021/5781 Temple Emanu El Hebrew School Tuition

\$700

Multi Child discount: 2nd child \$630 3rd child \$600

Student's Name: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_

Grade: \_\_\_\_\_

Please consider making a donation to help enrichment programming: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Please mail checks to: Temple Emanu-El  
1701 Washington Ave  
Miami Beach FL 33139

Credit card Information (VISA):

Name on the card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Amount to be charged:\$ \_\_\_\_\_

Signature: \_\_\_\_\_

For accounting only

Date received: \_\_\_\_\_ Comment: \_\_\_\_\_

Payment Method: \_\_\_\_\_

**Something Wonderful Happens to Jewish Children Here!**



# TEMPLE EMANU-EL

1701 Washington Avenue, Miami Beach 33139 305.538.2503

[www.tesobe.org](http://www.tesobe.org) [www.facebook.com/tesobe](http://www.facebook.com/tesobe)

Rabbi Marc Philippe

Barbara L. Breslow, Executive Director

## Membership Application

	Member One	Member Two
Name		
Hebrew Name		
Nickname		
Home Address		
Home phone		
Cell phone		
Email address		
Birth Date (month, day, year)		
Anniversary date (month, day, year)		
Married, single, widowed, partnered?		
Mother's Hebrew name (English or Hebrew letters)		
Father's Hebrew name (English or Hebrew letters)		
Are you a Kohen? Levi? Israelite?		
Are you Jewish by birth?		
If not, did you convert?		
year, rabbi, location		
Bat/bar mitzvah date		
Profession/occupation		
Name of business		
Business address		
Business telephone		
Office email address		
Out-of-state/vacation address		
Primary language & other languages		
Previous synagogue affiliation?		
Friends/relatives at Temple Emanu-El?		
Referred by?		



**How did you first learn about Temple Emanu-El?**

Member   Friend   Magazine/Newspaper   Website   Facebook   Jewish Directory (print/online)

**What is of special significance to you in joining Temple Emanu-El?**

- Deepening your sense of spirituality
- Opportunities for rabbinic counseling
- Becoming part of a community
- Social events/experiences
- Ensuring a Jewish education for your child(ren)
- High Holy Day worship or Shabbat services
- Continuing your own Jewish education
- Celebration of family life cycle events

**Please share any other information which would be helpful or important for us to know as we welcome you to the congregation.** \_\_\_\_\_

\_\_\_\_\_

**I/we are especially interesting in being active in:**

- Morning Minyan
- Membership & Outreach
- The Kiddush Club (Kookers)
- Fundraising/Development
- Youth Group
- Ritual Committee
- Volunteering
- Book Club
- Synagogue Programs
- Building

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Date \_\_\_\_\_





# TEMPLE EMANU-EL

1701 Washington Avenue, Miami Beach 33139

305.538.2503

[www.tesobe.org](http://www.tesobe.org) [info@tesobe.org](mailto:info@tesobe.org) [www.facebook.com/tesobe](http://www.facebook.com/tesobe)

## Annual Membership

<b>Millennial Membership (includes 1 High Holiday Ticket)</b>	<b>\$360</b>
<i>For an individual 30 years old and younger</i>	
<b>Individual Membership (includes 1 High Holiday Ticket)</b>	<b>\$1000</b>
<i>For an individual over 30 years of age</i>	
<b>Silver (Family) Membership (includes 2 High Holiday Tickets)</b>	<b>\$2000</b>
<b>Gold (Family) Membership (includes 4 High Holiday Tickets)</b>	<b>\$4000</b>
<b>Diamond (Family) Membership (includes 6 High Holiday Tickets)</b>	<b>\$6000</b>
<b>Platinum (Family) Membership (includes 8 High Holiday Tickets)</b>	<b>\$8000</b>

**\*\*\*Please add 30% Surcharge for Security Assessment to the Amounts Above**

**\*\*\*If you are a Member of Another Synagogue or Part Time Resident and will not be Attending High Holidays, please subtract \$200 per ticket from the prices above.**

**\*\*\*Monthly payment plans are available. Please call the office to discuss.**

## Privileges of Membership

- Participating in tefillot (religious services) and Talmud Torah (study);
- enjoying educational, cultural and social programs of the congregation;
- attending all meetings of the congregation, having a voice at all meetings, and voting at all congregational meetings;
- calling on the Rabbi and other professional staff for their religious needs, Jewish life cycle events and pastoral support;
- receiving all general Temple communications and notices;
- holding office in the congregation;
- being accorded priority High Holy Day seating; and
- being entitled to preferred rates for rental of Temple facilities.