Congregation Or Ami
Religious School Registration 2026-2027

Please complete this form by typing in the spaces or printing legibly by hand.
Kindly return to synagogue office or email to houstonorami@gmail.com.
(Please complete a copy of this first page for <u>each</u> student)

Student Information

Last Name:	First Name:
Hebrew Name:	Gender Identification:
Date of Birth:	Secular Grade as of August 2026:
Secular School & School District as of August 2026	

Parent/Guardian Information

Parent 1 Name:	Parent 2 Name:
Parent 1 Hebrew Name:	Parent 2 Hebrew Name:
Address:	Address:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell Phone:	Cell Phone:
Email:	Email:
Religious school communication will frequently occur via email, so we must have a current email address. Please contact the Or Ami office as soon as possible with any changes.	
If parents are divorced or separated, with whom does the child reside? ☐ Both ☐ Parent 1 ☐ Parent 2 ☐ Other (please specify)	

Sibling Information

Name:	Grade:
Name:	Grade:
Name:	Grade:

Emergency Contacts (please list two)

Name:	Relation:	Phone:
Name:	Relation:	Phone:

Special learning and/or medical needs, including allergies, or any other information we should have concerning your child:
1. I hereby authorize Congregation Or Ami to seek medical attention for my child in the event that I cannot be reached in an emergency. Signature:
2. My child has permission to participate in all class field trips. I will be notified in advance of all trips and will notify the school in writing if my child is unable to participate. Signature:
3. My child has permission to leave school with: Signature:
4. Please contact me about volunteering in the Religious School. Phone # and/or Email:

CONGREGATION OR AMI RELIGIOUS SCHOOL
Student Permission Form 2026-2027
(Please complete this form once for all students in the family)

Family Name:

Or Ami Religious School Directory Permission Form

I give Or Ami Religious School permission to publish my child(ren)'s contact information in a Religious School Directory, if one is published or distributed by email. This Directory is intended solely for Religious School parents and staff and will not be used for solicitation purposes of any kind.

Parent Signature: _____

Or Ami Religious School Photo Permission Form

Throughout the year, Or Ami students participate in activities or events in which they may be photographed, such as student projects, field trips, special events and holiday programming.

I give permission for photos of my child(ren) _____

_____

to appear as follows either alone, as part of a small group), and/or as part of a larger group:

Alone ☐ Small Group ☐ Large Group ☐	**<u>For all of the options below</u>**. (You do not have to complete the rest of this section if your choice is the same for all options, but you may indicate any exceptions below if you'd like.)
Alone ☐ Small Group ☐ Large Group ☐	School displays (such as school bulletin boards and classroom displays)
Alone ☐ Small Group ☐ Large Group ☐	Kol Ami (congregational newsletter, which is sent bi-monthly via e-mail to congregants and prospective members)
Alone ☐ Small Group ☐ Large Group ☐	Jewish Herald Voice (Houston's Jewish press)
Alone ☐ Small Group ☐ Large Group ☐	Outside publications (community newspapers, community flyers, Chronicle neighborhood section)
Alone ☐ Small Group ☐ Large Group ☐	Congregation Or Ami website
Alone ☐ Small Group ☐ Large Group ☐	Or Ami promotional brochure

Parent Signature: _____ Date: _____

CONGREGATION OR AMI RELIGIOUS SCHOOL
Fee Structure: 2026-2027
(Please complete this form once for all students in the family)

Annual Tuition:
Pre-K, Kindergarten, 1st & 2nd grades: $300
3rd-7th grades: $450
Book, Material & Snack Fee: $56
Bar/Bat Mitzvah Fee: $250

Payment Form

Name of Child	Grade	Tuition	Fees	Total

Total

I/we agree to pay tuition and fees for the above listed child(ren) for the 2026-2027 school year:

Full payment _____ date: _____

Two installments _____ date: _____&_____

_____ _____
Print name Print name

_____ _____
Signature Signature