

**BCHSJS SHABBATON AT
THE HUDSON VALLEY RESORT, KERHONKSON NY
April 13- 15, 2018**

PERMISSION SLIP TO BE RETURNED TO BCHSJS BY:

Sunday, March 25th

The cost is \$125.

Friday, April 13, 2018: Drop-off is at Temple Israel 475 Grove Street Ridgewood, NJ at 3:30pm

Sunday, April 15, 2018: Pick-up at Temple Israel 475 Grove Street Ridgewood, NJ at approximately 1:00 pm

Transportation will be provided to and from the hotel.

Name: _____ Grade: _____ Age: _____


Home Address: _____


Home Phone: _____ Student Cell: _____

Parent Cell Phone: _____ Parent Email: _____

List up to three friends (first and last name) with whom you would like to room:

I would like to: <input type="checkbox"/> Receive Vegetarian Meals <input type="checkbox"/> Give a D'var Torah <input type="checkbox"/> Recite Kiddush <input type="checkbox"/> Lead Birkat Hamazon
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 Unless indicated below, there are no medical restrictions on my child's activities. In the event of a medical emergency, if I cannot be reached, I authorize the staff of Bergen County High School of Jewish Studies to obtain emergency medical treatment for my child.

 Does applicant have any medical problems and/or take medications? Yes / No

If YES, specific limitations and written instructions as to administering of medication must be attached. List all medications brought to the Shabbaton.

Emergency Contact (other than Parents): Name & Phone:

Family Health Insurance Policy: Carrier and Account Number:

 Parent/Guardian Signature: _____

(over - please complete reverse)

Rules and Regulations

(read and sign):

POSSESSION or USE of any illegal drugs, alcohol, or tobacco products before, during, or after the weekend will result in IMMEDIATE EXPULSION FROM THE SCHOOL and may also result in referral of the matter to the appropriate authorities. All participants MUST be in the appropriate places at the appropriate times and must attend all activities.

All participants must adhere to the entire schedule and program. All attendees must abide by the curfew and maintain a quiet sleeping area. BCHSJS reserves the right to search the room and belongings of any attendee if it has reasonable grounds to believe that such a search is necessary to secure the health, safety, and/or welfare of the program and/or its participants. The BCHSJS Principal or his designee reserves the right to enforce other rules relating to the integrity of the Shabbaton and/or the health, safety, or welfare of its participants.

The hotel is to be treated with respect; participants are not to destroy or harm any property whatsoever. You will be responsible for any damage you cause. Misconduct (fighting, cursing, etc.) will not be tolerated.

I have read and understood the above rules and regulations and agree to abide by them. I realize that there will be consequences for breaking these rules.



Student Signature: _____

Parent Signature: _____

Questions?

**Call Galeet Lipke, Student Activities Coordinator at 201-488-0834 or
email studentactivities@bchsjs.org**