JEM Hebrew School Application

Student #1 Information					
Name:					
Hebrew Name:					
Birth date:		_ Age:	Grade :		
Does your child red	ad basic Hebrew? 🗆 Yes	□ No If Yes	: □ Good □ Fair	□ Poor	
What school does	your child attend?				
			_		
Is the natural mother of the child Jewish? $\ \square$ Yes $\ \square$ No					
Were there any conversions or adoptions in your family? ☐ Yes☐ No					
If Yes, please desc	ribe:				
Additional comme	ents:				
-					
	Student #2	Information			
Name:					
Hebrew Name:					
Birth date:			Grade :		
	ad basic Hebrew? 🗆 Yes	□ No If Yes	: 🗆 Good 🗆 Fair	□ Poor	
What school does	your child attend?				
			_		
		Yes No			
	onversions or adoptions in y 				
If Yes, please describe:					
Additional comments:					

Parent Information				
Father's Name:				
Home Phone Number:				
Work Phone Number:				
Mobile Phone:				
Occupation:				
Email Address:				
Mother's Name:				
Home Phone Number:				
Work Phone Number:				
Mobile Phone:				
Occupation:				
Email Address:				
Address:				
Emergency Information				
Emergency Contact:				
Home Phone:				
Mobile Phone:				
Doctor's Name:				
Doctor's Number:				
Allergies or other Medical Condition:				
I hereby register my child in JEM Hebrew School, hereinafter JEM and grant permission for my child(ren) to use all of the play equipment and participate in all activities of the JEM program. herby grant permission for my child(ren) to leave JEM center, Beverly Hills Sport Center Etc program premises under the supervision of a staff member for field trips in authorized vehicles. also authorize JEM the right to use any pictures, videos and audio recordings taken of my child fo any of its purposes without compensation. I authorize any adult acting on behalf of JEM Hebrew School to hospitalize or secure treatment for my child, I further agree to pay all charges for that care and/or treatment. It is understood that if time and circumstances reasonably permit, JEM Hebrew School personnel will try, but are not required, to communicate with me prior to such treatment I indemnify and hold harmless JEM, its officers, agents, and employees against any and all mishaps that may occur during camp hours.				
Signature of Parent or Legal Guardian Date				

Beverly Hills Sport Center RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT (MEMBER/FAMILY/GUEST)

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the Beverly Hills Sport Center , Jewish Educational Movement, Camp JEM, BHCSC, thereinafter referred to as the BHSC for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any offsite program affiliated with the BHSC, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the BHSC for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE BHSC FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFFSITE PROGRAM AFFILIATED WITH THE BHSC, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the BHSC, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, or about the premises or any facilities or equipment therein or participating in any program affiliated with the BHSC.
- 2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the negligence, intentional act or other contributory act of the undersigned or such children in, upon or about the BHSC premises or in any way observing or using any facilities or equipment of the BHSC or participating in any program affiliated with the BHSC whether caused by the negligence of the releasees or otherwise.
- 3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to the negligence of releasee or otherwise while, in about or upon the premises of the BHSC and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the BHSC.
- 4. THE UNDERSIGNED HEREBY AUTHORIZES the making and use of photographic and video graphic images of applicant and whomever accompanies him/her onto said facilities, premises and in offsite programs, including audio recordings, and the reproduction of these images and / or recordings for publicity purposes or any purpose whatsoever. Applicant relinquishes, waives, and forgoes the right to any payment, fee, compensation, etc. for the use of any of these images and / or recordings.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

DATE:	I HAVE READ THIS RELEASE.		
Signature of Applicant / Legal Guardian	Printed Name of Applicant / Legal Guardian		
Signature of 2 _{nd} Applicant	Name of all Children in Program or Facility		