



One child per registration form



Czech and Slovak School of the Bohemian Hall
Registration deadline: March 31, 2012

Student's First and Last Name _____

Date of Birth: _____ Place of Birth: _____

Nationality: _____ Citizenship: _____

Home Address: _____

City: _____ State _____ Zip Code _____

What school are you applying for? (circle one) Czech School Slovak School

What language do you prefer to communicate in with the school? (circle one) Czech Slovak English

Emergency and Preferred Phone# _____ Contact Person _____

Primary Doctor's Name _____ Phone # _____

Mother's First and Last Name: _____

Phone# _____ Email: _____

(preferred email? YES NO)

Father's First and Last Name: _____

Phone # _____ Email: _____

(preferred email? YES NO)

Your child can only be released to (names and phone numbers):

1. _____

2. _____

3. _____

Please circle the school day you prefer*:

CS School:	Friday 5:00-7:30pm	Saturday 10:00am-12:30pm	Saturday 2:15-4:45pm
Folk Dance Rehearsal(optional):	7:30-8:30pm	1:00-2:00pm	1:00-2:00pm

*Kindly note that the final decision about the placement will be made by the school.

Will your child be interested in folk dancing?	Yes	No
Does your child speak the target language (Czech or Slovak)?	Yes	No
Does your child speak English?	Yes	No
Does your child have any learning or behavioral disabilities? (ADHD, ADD, Aspberger, etc.-This information is shared only with your teacher)	Yes	No

If yes, please explain _____

Is your child exceptionally gifted or talented? Yes No

If yes, please explain _____

Your child's interests (singing, drawing, sports, etc)

Does your child have any serious illnesses or allergies ? Yes No

If yes, please explain _____

Any other concerns _____

Parent Signature Date

Please complete all 3 pages and send them to: **Blanka Sylvester, Czech and Slovak School, Bohemian Hall, 29-19 24th Ave., Astoria, NY 11102** OR

Email it to : czkschool@bohemiahall.com

Parent Questionnaire

(if you are applying for more than one child please fill this page only once)

To maintain the excellence of our program, we ask parents to assist us with various tasks pertaining to the school, including school fundraisers.

1. Have you volunteered at a school before? (Please explain) _____

2. Are you willing to volunteer at our school? Yes No

3. If yes, what days are you available to volunteer? (Please circle as many days as you wish)

Mon Tue Wed Thu Fri Sat Sun

4. What hours are you available? _____

5. How many hours a week? _____

6. Are you willing to sell various items (chocolate, candles, etc.)? Yes No

7. Please check off any activities you are willing to help with:

- Participating in school fundraisers
- Taking pictures at school events and maintaining an online school picture gallery
- Videotaping school events and creating DVDs to give to all students at the end of the school year
- Coordinating snacks and meals for school parties
- Coordinating school trips
- Creating and updating school phone directory
- Creating and maintaining school chronicle
- Coordinating a fundraiser (Book Sale, Children's Day, Chocolate Sale, Christmas Sale, etc.)
- Coordinating parent patrols around the Bohemian Hall building
- Coordinating teacher gifts
- Coordinating student end-of-year gifts
- Coordinating purchase and/or exchange of school uniforms among parents
- Parent Class Representative (communicating with parents and serving as a parent ambassador)

Print Your Name