•	Youth Gro	oup Members	hip For	m 2020-2021			TOUCHY
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		Jamie M				đ	ATID
		n Engageme afdali@temple		rning and Pro rim.org	ograms		@TOUCHY_TDD
	-	954-389-123	2 ext. 1	L07		5	@ATID_TDD
	2360 Gla	des Circle We www.dordo	-			y	@TOUCHY_TDD
Gesher (K-2 nd)	🗆 Gibori	im (3-5 th)		TID (6-8 th)	□ TO	UCH	((9-12th)
Participant's Name:				Gra	ade as of <i>l</i>	Aug. 20	20:
Email of Participant: (ATID & TOUCHY)				Da	ite of Birth	1:	
Home Address:							
City:		Zip:		Cell # of Particip ATID & TOUCHY			
Participant Enjoys:							
MEDICAL INFORMATION: Ple Youth Director should be awa						- .	
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	nd Grades) Season Pass			
□ \$136.00	(Not registered in Religious School)	Season Pass: Includes e	events and trips with meal a	and/or snack & shirt.
<u>Giborim (3-5</u> □ \$136.00	5 th Grades) Season Pass (Not registered in Religious School)	Season Pass: Includes e	events and trips with meal a	and/or snack & shirt.
Temple M	Grades) Dues embers (Not registered in Religious School)		Non-Members	\$ 200.00
ATID dues inc cost.	lude fun-filled in-temple events with dinner a	and/or snack and one you	uth group shirt. Off-site trip	os will be at an additional
TOUCHY (9-:	12 th Grades) Dues (Includes NFTY-STR Du	ies)		

□ Temple Members (Not registered in Religious School) \$ 145.00
 □ Non-Members \$ 280.00
 ◇ Non-TDD Members who join TOUCHY will become a Temple Dor Dorim Teen Temple Member which will include
 One Teen High Holy Day Ticket and the opportunity to join T.A.G., dinner and discussion with the Rabbi.
 TOUCHY dues include almost all fun-filled in-temple events and one youth group shirt. Off-site trips will be at an additional cost.

T-Shirt (All Youth Groups)

Each youth group member will receive a T-shirt. Gesher & Giborim **must** wear their youth group shirt to off-site trips. If your child does not wear their youth group shirt on the day of an off-site trip, they will be given another shirt, if available, and you will be charged \$10.00. Please circle T-Shirt Size (if available): Child S Child M Child L Adult S Adult M Adult L Adult XL

Youth Scholarship Fund

The Youth Scholarship Fund allows the youth of Temple Dor Dorim to be even more deeply involved in programs locally, throughout the country, and in Israel. We would like to make a donation to the **Rabbi Norman & Shoshi Lipson Youth Scholarship Fund**. \Rightarrow 360 \Rightarrow 180 \Rightarrow 100 \Rightarrow 54 \Rightarrow 36 \Rightarrow 18 \Rightarrow Other:

Payment Information				Amount Due:	
Credit Card #:				Exp. Date:	
American Express	Discover	MasterCard	🗆 Visa	Check #: Payable to Temple Dor Do	orim
I agree to have my credit card charged as indicated above. Signature of Cardholder:				Today's Date:	

Authorizations/Permissions:

General: As parent/guardian of my child, I grant permission for my child to participate in all Temple Dor Dorim Youth Programming for the 2020-2021 year. I hereby release Temple Dor Dorim and its staff of any and all liabilities incident to and arising out of any/all Youth Department programs.

Publicity Release: As parent/guardian of my child, I grant permission for Temple Dor Dorim to use my child's likeness or photograph in any publication, advertisement, display, or other medium in connection with the programs, activities, and events of Temple Dor Dorim. **with name without name**

RSVPs: I understand that space at an event is contingent upon on timely RSVPs and that RSVPs will be considered binding for payment.

Immunization Certification: As parent/guardian of my child, I confirm that _

has completed the age-appropriate vaccine schedule recommended by the Florida Department of Health.

Medical/Surgical: As parent/guardian of my child, in the event that I cannot be reached in an emergency, I give express permission for Temple Dor Dorim to secure proper medical treatment for my child at a hospital or with a physician selected by Temple Dor Dorim. I hereby grant express permission to the physician or hospital selected by the temple to hospitalize, treat, order injection or anesthesia, or perform surgery for my child. Furthermore, I accept full responsibility for any such services rendered.

Parent/Guardian's	Signature:
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Date:

Please see reverse side!