

BEKI RELIGIOUS SCHOOL GENERAL INFORMATION

BEKI Religious School (BRS) is open to children entering kindergarten through seventh grade. The school provides students with a solid academic program including Hebrew language, Torah study, Jewish history, prayers, holiday rituals, social responsibility, and principles of egalitarian Conservative Judaism in a loving and personalized environment. Students have many opportunities for personal achievement in learning new skills, while having a lot of fun along the way.

Students with special educational needs are welcomed in regular classes and also have individual tutoring through the **Meyuchad Program** administered by the Jewish Federation Department of Jewish Education. For information call Susan Jacobson, Program Coordinator, at 776-1141.

When parents demonstrate their interest in synagogue and school activities, children are eager to do the same. Participation in synagogue activities, especially on Shabbat, reinforces what your children are learning in school. Parents are asked to volunteer for special projects and events, and can sponsor a snack in honor of a child's birthday or family simcha as a way to defray school expenses and celebrate as a community.

Attendance is required for all students in all classes. More than a few absences jeopardizes mastery of the skills and information necessary for Jewish literacy. Please make attendance a priority!

Grades K-7 meet Sundays as per the school calendar, from 9 a.m. to noon
Grades 3-7 also meet Wednesdays as per the school calendar from 4 to 6:15 p.m.

Tuition covers less than half the cost of educating students at BRS. Membership dues and contributions to the Annual Appeal help close the gap. We are indebted to BEKI members who established funds providing annual contributions to our school: George G. Posener for the George G. and Leah Posener Fund for Youth Education at BEKI, and Gladys R. Lipkin for the Gladys R. Lipkin Fund for the BEKI Religious School.

The Louis Friedman Scholarship Fund was established as a memorial by Dr. Ralph Friedman, his son, and family. Mr. Friedman prepared generations of BEKI members for their Bar and Bat Mitzvah celebrations. This fund provides scholarships for BEKI members in need of assistance. Contributions to this fund help ensure a Jewish education will be available to all students. **Applicants are also required to apply for a scholarship from the Jewish Scholarship Initiative of the Jewish Federation.** Both application forms are in this packet. Please return them by **July 1, 2010** for timely consideration. For more information about the Jewish Scholarship Initiative, contact Anat Weiner at the Jewish Federation, 203 387-2424 ext. 313.

To register, please send these forms to BEKI by JUNE 15, 2010 to benefit from early-bird tuition fees.

- *** Student Registration Form,
- *** Parent/Guardian Information Form,
- *** Tuition Payment Form,
- *** Universal Permission Form,
- *** Scholarship applications if you are applying.

Useful Contacts:

Rabbi Jon-Jay Tilsen: jjtilsen@beki.org

Ina Silverman, Religious School Principal: principal@beki.org

Jay Sokolow, BEKI President: president@beki.org

Donna Levine, BEKI Treasurer, coordinates scholarships and payment plans: sdsij@aol.com

Peggy Hackett, BEKI Office Manager: office@beki.org

Last Name of Student(s)

First and Middle Names of Student(s)

Full Name of Mother

Mother's Hebrew Name

Mother's Home and Mailing Address

Mother's Phone Numbers: Home

Work

Cell

Mother's Email Address:

Full Name of Father

Father's Hebrew Name

Father's Home and Mailing Address (if different)

Father's Phone Numbers: Home

Work

Cell

Father's Email Address:

STUDENT REGISTRATION FORM

BEKI RELIGIOUS SCHOOL 2010-2011 / 5771

Please check here if your student is new to BRS __ . Please check here if your student is in Meyuchad __ .

Student's full name

Student's full Hebrew name (in Hebrew or transliteration)
(If you have not given your student a Hebrew name leave this blank and Rabbi Tilsen will help you choose one.)

Student's birthday (Month/Day/Year)

Grade in secular school Sept. 2010

Please describe any experience your student has had with Hebrew:

Please describe your student's Jewish educational experience including synagogue attendance, home rituals practiced, camp, etc.

EMERGENCY CONTACT INFORMATION:

NAME OF 1st CONTACT: _____

PHONE NUMBERS: _____

NAME OF ALTERNATE CONTACT: _____

PHONE NUMBERS: _____

PEDIATRICIAN: _____ PHONE NUMBER: _____

DENTIST: _____ PHONE NUMBER: _____

ALLERGIES: _____

SPECIAL INSTRUCTIONS: _____

Full Name of Student(s)

BEKI Religious School Grade(s)

Mailing Address

Home Phone of Student(s)

A. Early Bird Tuition For BEKI Members in Good Standing: \$670 for one child \$ _____
 (Until June 15, 2010) \$1,200 for two children
 \$1,700 for three children
 Non-BEKI Member Early Bird Tuition: \$1,250 per child

B. Book and Materials Fee: \$75 per child \$ _____

C. LATE REGISTRATION FEE AFTER JUNE 15, 2010: \$60 PER CHILD \$ _____

Non-refundable Total Amount For Tuition and Fees Due \$ _____

D. Donation to Louis G. Friedman Scholarship Fund: \$ _____

E. Snack Sponsorship: (\$18 per sponsorship) \$ _____

We want to sponsor a BRS snack on this Sunday date on the school calendar _____

In honor of _____

TOTAL AMOUNT ENCLOSED (Please make check Payable to BEKI): \$ _____

Louis Friedman Scholarship Fund Application Form 2010-2011

All application information is confidential.

Name of Student Date of Birth Student's Grade

Parents' Names

Parents' Address

Parents' phone number(s)

Please include this along with your Registration forms. **All applicants must also apply for a scholarship from the Jewish Scholarship Initiative of the Jewish Federation** (application enclosed).

Mail all registration and scholarship forms to:

BEKI Religious School Registration
85 Harrison Street
New Haven CT 06515

All applications must be received by JULY 1, 2009 to ensure timely review.

We regret that applications received after that date may be considered since all available funds may be allocated. Louis Friedman Scholarships are available only to children of members in good standing of Congregation Beth El - Keser Israel who have a demonstrable need for financial assistance.

The Louis Friedman Scholarship Fund at Congregation Beth El-Keser Israel was established by the Dr. Ralph Friedman Family and supported by students and friends to honor the memory of our beloved teacher by continuing his work of providing Jewish education for children.

Mr. Friedman's tenure as "Shamash," Ritual Director, spanned several generations. Renowned for his wisdom, dedication, erudition, phenomenal memory, and deep love for his people and Torah, Mr. Friedman gave the gift of Torah to hundreds of students. Our congregation has been blessed with many gifted rabbis, teachers, and leaders over the years, but for those of us privileged to know him, Beth El-Keser Israel will always be known as "Mr. Friedman's shul."

Each year, the Louis Friedman Scholarship Fund supports several deserving children whose families need financial assistance to fund their studies at the BEKI Religious School. Your contributions to this fund, together with those of other congregants, ensure that a Jewish education will be available to all students.

UNIVERSAL PERMISSION FORM FOR BEKI RELIGIOUS SCHOOL

2010-2011/5771

I give permission for my son(s)/daughter(s) _____
to participate fully in all activities of the BEKI Religious School during the
2010-2011/5771 school year. I understand that transportation for field trips will be provided by parent and/or
teacher carpools, or walking.

I hereby empower the BEKI staff members and BEKI Religious School staff and faculty members to act for me
in accordance with his/her best judgment in case of emergency.

Name of first parent to contact if the need arises:

Home Phone:

Work Phone:

Cell Phone:

Name of second parent to contact if first parent is unavailable:

Home Phone:

Work Phone:

Cell Phone:

Third person to contact if the need arises:

Home Phone:

Work Phone:

Cell Phone:

Doctor's Name:

Doctor's Office Address:

Doctor's Phone Number:

Dentist's Name:

Dentist's Office Address:

Dentist's Phone Number

Health Insurance Company:

Policy Number: Group Number:

Are there any medical or dietary concern or limitations to your child's full participation in the BRS program or
that staff should otherwise know about?

Signature of Parent or Guardian _____

Printed name of signer _____

Date _____

BEKI RELIGIOUS SCHOOL PARENT INVOLVEMENT FORM

2009-2010/5769-5770

Your name(s):

How do we contact you?

I/We can help with the following:

____ A Shabbaton

____ Holiday celebrations

____ The Pesach (Passover) model seder

____ Graduation festivities

____ My student's classroom activities as determined by his/her teacher

____ I can play an instrument and help teach Hebrew songs

____ I can teach Israeli dancing

____ I am involved in a New Haven service organization (like a soup kitchen) and can help arrange student participation

____ I would be interested in helping with _____