Shalom! Below is information about the BEKI Religious School and registration:

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 to learn new skills while having a lot of fun along the way. Students with special educational needs are welcomed in the BRS Meyuchad individualized program.

When parents demonstrate 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. We encourage parents to commit to a continuing education program for themselves to model lifetime learning for their children.

**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.**

Absences limit your student’s ability to master the skills and information necessary for Jewish literacy. Please make attendance a priority!

Tuition covers less than half the cost of educating students at BRS. We are indebted to BEKI members who established scholarship funds: the George G. and Leah Posener Fund for Youth Education at BEKI, the Gladys R. Lipkin Fund for the BEKI Religious School, and the Louis Friedman Scholarship Fund. Your contributions help ensure a Jewish education is available to all students. If you will be applying for BEKI scholarship funds please contact Steve Rudof, in confidence, at s1rudof@hotmail.com. He will discuss individualized arrangements with you.

To register for September please send these completed forms to the BEKI office:

*** Student Information Form

*** Universal Permission/Emergency Form

*** Tuition Payment Form

Note that the early bird deadline for completed registration forms is June 15. After June 15 you will be charged a late fee.

A school calendar will be distributed over the summer. The first day of BRS is expected to be September 13/Elul 24. We do not yet know if we will begin the year in the BEKI building or online.

Finally, if you have considered a day school education for your student(s) but were stymied by tuition, please reconsider and contact Ezra Academy. New scholarship funds may be available.

It is an honor and pleasure to serve as BRS principal and I look forward to hearing from you!

Ina Silverman, Principal
BEKI RELIGIOUS SCHOOL 5781 (2020-2021) STUDENT REGISTRATION FORM

Full Name of Student(s):  

Hebrew Name of Student(s):  

_____________________________________________________________________________________

Birthday of Student(s):  

Secular School Grade of Student(s):  

_____________________________________________________________________________________

Full Names of Parents/Guardians:  

_____________________________________________________________________________________

Hebrew Names of Parents:  

_____________________________________________________________________________________

Home Address:  

_____________________________________________________________________________________

Mailing Address if Different:  

_____________________________________________________________________________________

Home Phone:  

_____________________________________________________________________________________

Mother’s/Guardian’s Work Phone:  

_____________________________________________________________________________________

Mother’s/Guardian’s Cell Phone:  

_____________________________________________________________________________________

Father’s/Guardian’s Work Phone:  

_____________________________________________________________________________________

Father’s/Guardian’s Cell Phone:  

__________________________________________  

Email Addresses for BRS Correspondence:  

____________________________________________________________________________________

TUITION PAYMENT FORM
A. Tuition For BEKI Members in Good Standing:  
   $680 for one child  
   $1,200 for two children  
   $1,730 for three children  

   (Before June 15, 2020)  

   $____________  
   $____________  
   $____________  

Non-BEKI Member Tuition:  
   $1,300 per child  

   (Before June 15, 2019)  

   $____________  

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

   $____________  

C. Late Fee for returning families after June 15, 2020, $75 per child:  

   $____________  

D. Donation to Scholarship Fund:  

   $____________  

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

   We want to sponsor snack on this Sunday date on the school calendar: ____________________________  

   $____________  

TOTAL AMOUNT ENCLOSED (Please make check payable to BEKI):  

   $____________  

PLEASE NOTE TUITION AND FEES ARE NON-REFUNDABLE.

I give permission for my son(s)/daughter(s)
to participate fully in all activities of the BEKI Religious School during the 2020-2021/5781 school year. I understand that transportation for any field trips will be provided by parent and/or teacher carpools, or walking.

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

*Name of First Person to Contact in an Emergency (usually a parent/guardian):____________________________________________________________
1st Phone Number to Call:___________________________ 2nd Phone Number to Call:____________________________________________________________

**Name of Second Person to Contact if First Person is Unavailable: ________________________________________________________________
1st Phone Number to Call:___________________________ 2nd Phone Number to Call:____________________________________________________________

***Reliable Non-Parent/Guardian Contact:_________________________________________________________________________
1st Phone Number to Call:___________________________ 2nd Phone Number to Call:____________________________________________________________

Child’s Doctor’s Name(s): ___________________________________________________________________________________________
Doctor’s Address:________________________________________ Phone:________________________________________
Child’s Dentist’s Name: ___________________________________________________________________________________________
Dentist’s Address:________________________________________ Phone:________________________________________

Health Insurance Company: ____________________________________________________________
Policy Number:_________ ID Number:_________ Group Number:________________________________

If there are any medical or dietary concerns or limitations to your child’s full participation in the BRS program, or anything staff should otherwise know, including food allergies, please write a note below. If your child requires medical equipment please be sure to notify the principal.

Signature of Parent/Guardian:___________________________________________________________________________________________
Printed Name of Signer:______________________________________________________________________________________________