



# Beth El-The Beaches Synagogue Religious School

## Registration Form

### Fees and Tuition 2018-19 School Year

**Early Registration Deadline for Discounted Fee is June 30, 2018.**

All student families must be Synagogue members in *good standing* for the year (Includes one-time non-member status). *Good standing* means a membership application for Year 2018-19 on file, dues commitment on file, dues payments remain current and/or paid in full on or before year's end. Note: Special financial arrangements are considered on an annual basis by the Treasurer and remain confidential.

**All school fees and tuition must be paid in full by January 1, 2019.**

Parent(s)/Guardian(s) Name(s) \_\_\_\_\_

Membership Name \_\_\_\_\_

Child's Name \_\_\_\_\_ Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_

☐ **Registration Fee** **\$225.00 (Before June 30, 2018 \$ 125.00)** Amount Due \$ \_\_\_\_\_

☐ **Member Tuition - Grades Pre-K - 7** (includes books and supplies) Number of Children \_\_\_\_\_  
\$750.00 per student (5% sibling discount or \$712.50 for each additional student)

**1 Child \$750.00** **2 Children \$1,462.50** **3 Children \$2,175** Amount Due \$ \_\_\_\_\_

☐ **Non-Member Tuition: \$1,320.00 for one student (with prior approval)** Amount Due \$ \_\_\_\_\_

Pre-K - 3rd grade option: one-time only per student and family for "trial" year After "trial" year students' family must become members.

☐ **B'nai Mitzvah Fee: \$975.00 per student** (includes all supplies) Amount Due \$ \_\_\_\_\_

(Note: B'nai Mitzvah Fee is in addition to regular Tuition Fee) \*\*\$300 minimum deposit required to hold date chosen.

\*\*\$975 fee paid in full prior to start of tutoring.

☐ **8<sup>th</sup>/9<sup>th</sup> Grade Tuition:** **\$325.00 per student** Number of Students \_\_\_\_\_ Amount Due \$ \_\_\_\_\_

☐ **Confirmation Class Fee - Grade 10:** **\$250.00 per student** Number of Students \_\_\_\_\_ Amount Due \$ \_\_\_\_\_

**TOTAL SCHOOL FEES DUE: \$ \_\_\_\_\_**

Executive Director's verification of Amount Due \_\_\_\_\_

**School Enrollment Requires Current Beth El Membership. Please indicate your Membership Status below:**

☐ **Renewal of Annual Synagogue Membership, Fiscal Year 2018-19 (July 1, 2018-June 30, 2019), Date Submitted \_\_\_\_\_, 2018**

☐ **New Membership Application Attached \_\_\_\_\_ or Date Application Was Submitted \_\_\_\_\_, 2018**

#### Payment Options:

\_\_\_\_\_ **In Full by August 1, 2018**

\_\_\_\_\_ **50% by August 1, 2018 and 50% by January 1, 2019**

**I choose the following payment method: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card \_\_\_\_\_**

Visa/ MasterCard/American Express (circle one) Card # \_\_\_\_\_

CVV# \_\_\_\_\_ Billing Zip Code \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it Appears on Card: \_\_\_\_\_

I hereby authorize Beth El-The Beaches Synagogue to charge the credit card specified above as a **one-time** payment with a 3% processing fee added.

Credit Card Authorization Signature: \_\_\_\_\_ Date \_\_\_\_\_

*I hereby agree to pay my child's tuition as specified above. If tuition is not paid in full by January 1, 2019 I understand my child may be excluded from attending Beth El-The Beaches Religious School. Should legal collection become necessary, I agree to pay all reasonable attorneys, court, and other costs incurred in collection of such fees. I further understand that Religious School payments are separate from and in addition to membership dues payments.*

**Signature of Person Responsible for Payments: \_\_\_\_\_ Date: \_\_\_\_\_**

#### Office Use Only:

**Synagogue Member Renewal FY18-19:** commitment pending \_\_\_\_\_ commitment received \_\_\_\_\_

**New Synagogue Member FY18-19:** commitment pending \_\_\_\_\_ commitment received \_\_\_\_\_ Non-Member Status Approved \_\_\_\_\_

**School Payment Received:** \_\_\_\_/\_\_\_\_/\_\_\_\_ \$ \_\_\_\_/\_\_\_\_/\_\_\_\_ \$ \_\_\_\_/\_\_\_\_/\_\_\_\_ \$ \_\_\_\_\_



# BETH EL-THE BEACHES SYNAGOGUE RELIGIOUS SCHOOL

## Emergency Information and Medical Release

Please Print (All information must be complete before child may attend class.)

Child's Name: \_\_\_\_\_ Sex (circle one) M F

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School Grade: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Address (If Different): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Home: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Address (If Different): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

ALLERGIES: \_\_\_\_\_

MEDICATIONS: \_\_\_\_\_

It is understood that my child \_\_\_\_\_, is in good physical health and has my permission to participate in all activities that are part of the regular Religious School program.

I hereby authorize the Education Director or agents of Beth El Religious School to make available to my child, \_\_\_\_\_ professional medical care if such care is needed.

It is understood that every effort will be made to notify me, my spouse, or designated emergency contact before such action is taken. It is further understood that every effort will be made to contact my child's physician prior to any treatment. I give my permission for my child to receive proper medical treatment by any doctor, nurse, and paramedic or hospital medical staff licensed by the State of Florida.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency Contact** (other than parent):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

# BETH EL-THE BEACHES SYNAGOGUE RELIGIOUS SCHOOL

## Media Release

Please Print (All information must be complete before child may attend class.)

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

During the year, at Religious School and Synagogue events, we hope to take lots of pictures, many of which we may wish to post on the Synagogue's website, Facebook page and Instagram and in newspapers and brochures, to enable everyone to enjoy and remember these special times. These postings will contain pictures only, without any identifying names. We recognize, however, that some parents may choose not to have their children's pictures used, and we wish to respect that sense of privacy. To help us, please complete this form, so that we will be advised of your choice.

\_\_\_\_\_ I give permission

\_\_\_\_\_ I do not give permission

to Beth El-The Beaches Synagogue to post pictures of myself and my child(ren) on the Synagogue's website, Facebook page and Instagram and in newspapers and brochures.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# BETH EL-THE BEACHES SYNAGOGUE RELIGIOUS SCHOOL

## Grandparent Information

Please Print

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Religious School Grade: \_\_\_\_\_

Grandparent's Name: \_\_\_\_\_ (circle one) maternal paternal

Home: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Interest in Volunteering: (circle one) YES NO

Grandparent's Name: \_\_\_\_\_ (circle one) maternal paternal

Home: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Interest in Volunteering: (circle one) YES NO

Grandparent's Name: \_\_\_\_\_ (circle one) maternal paternal

Home: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Interest in Volunteering: (circle one) YES NO

Grandparent's Name: \_\_\_\_\_ (circle one) maternal paternal

Home: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Interest in Volunteering: (circle one) YES NO



**BETH EL**  
*The Beaches Synagogue*  
**RELIGIOUS SCHOOL**

Jewish education is a partnership between the families and the synagogue. Both are vital components in a successful program. Throughout the religious school year we rely on parents for a variety of things including helping in the classrooms and special events, serving on our education committee, and sharing your skills and talents. Please return this form to the synagogue office with your registration form and let us know how you will help us in the upcoming school year!

\_\_\_\_ I would like to be a **SHALOM PARENT**.

A Shalom Parent will sit in the lobby and monitor and assist with the coming and going of students.

\_\_\_\_ I would like to be a **ROOM PARENT**.

A Room Parent keeps in contact with his/her child's teacher and assists the teacher with special projects and events. Room parents also help to organize the snack schedule and communicate with other parents.

\_\_\_\_ I have a **SKILL/TALENT** that I would be happy to share with the Religious School.

My Skill/Talent: \_\_\_\_\_

(Have you recently visited Israel and would be willing to talk to your child's class? - Do you play a musical instrument? - Do you love to cook and would be happy to assist a teacher in a cooking project? - Are you an artist?)

\_\_\_\_ I would be interested in serving on the **EDUCATION COMMITTEE**.

Please contact Vickie Kennedy for more information.

\_\_\_\_ I would be happy to help with **SPECIAL PROJECTS/EVENTS** throughout the year.

For example:

\_\_\_\_ Fundraisers

\_\_\_\_ Baking

\_\_\_\_ Pizza in the Hut

\_\_\_\_ Purim Celebration

\_\_\_\_ Hanukkah Celebration

\_\_\_\_ Pizza and Salad Dinner & Bingo

\_\_\_\_ Family Shabbat Dinner

\_\_\_\_ Passover-Mock Seder

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

CHILD: \_\_\_\_\_ GRADE: \_\_\_\_\_

CHILD: \_\_\_\_\_ GRADE: \_\_\_\_\_

CHILD: \_\_\_\_\_ GRADE: \_\_\_\_\_

CHILD: \_\_\_\_\_ GRADE: \_\_\_\_\_

**2018-19 Religious School Calendar**  
**Meets on Sundays from 9:00 AM to 12:00 PM**  
**Opening Day – August 12, 2018**

August:

12, 19, 26

January:

6, 13, \*, 27

September:

\*, \*16, 23, 30

February:

3 \*, \*, 24

October:

7, 14, 21, 28

March:

3, 10, \*, \*, 31

November:

4, \*, 18, \*

April:

7, 14, \*, 28

December:

2, 9, 16, \*, \*

May:

5

Teacher Meetings: August 5<sup>th</sup> at 10:00 AM  
August 26<sup>th</sup> after Religious School  
September 30<sup>th</sup> after Religious School  
October 28<sup>th</sup> after Religious School  
January 27<sup>th</sup> after Religious School  
March 31<sup>st</sup> after Religious School

Madrichim Meetings: August 5<sup>th</sup> at 11:00 AM

Denotes an 8<sup>th</sup>/9<sup>th</sup> Class Meeting

\*Denotes a "no school" day

9-2 ..... Labor Day Weekend  
9-9 ..... High Holy Day Break  
11-11 ..... Veterans' Day Weekend  
11-25 ..... Thanksgiving Weekend  
12-23 to 12-30 ..... Winter Break  
1-20 ..... Martin Luther King, Jr. Day  
2-10 ..... 26.2 With Donna Marathon Weekend  
2-17 ..... Presidents' Day  
3-17 to 3-24 ..... Spring Break  
4-21 ..... Passover



## Schedule of Events

Sunday, September 23 at 12:00 PM	Pizza in the Hut
Friday, October 5 <sup>th</sup> at 7:00 PM	Kindergarten Consecration/Simchat Torah
Sunday, October 21 <sup>st</sup> at 9:30 AM	B'nai Mitzvah Meeting (6 <sup>th</sup> & 7 <sup>th</sup> Grade Parents)
Friday, November 2	Student Led Shabbat
Sunday, December 2 <sup>nd</sup>	School Hanukkah Celebration (during Religious School)
Sunday, December 9 <sup>th</sup> at 5:30 PM	Congregational Hanukkah Dinner (Benefitting the Religious School)
Sunday, March 10 <sup>th</sup>	School Purim Celebration
Sunday, April 14 <sup>th</sup>	School Passover Celebration
Friday, April 12 <sup>th</sup> at 5:30 PM	Pizza and Bingo/Student Led Shabbat
June 7 <sup>th</sup> at 7:00	Confirmation

School Phone Number ..... (904) 273-9100  
 Sunday Phone Number .....(904) 318-7204

### School Policies and Procedures:

In the event you need to pick up your child early, kindly come to the front lobby of the synagogue to sign out your child. We will bring your child to you.

For safety reasons, please **do not** attempt to pick up your child directly from the classroom.

Please refrain from texting or calling your child during school hours.

We have a dress code. This includes: no spaghetti straps without a covering, no flip flops for safety reasons, and no inappropriate/offensive/political t-shirts.

Thank you for following these procedures!