

Tuition Payment Methods

_____ Enclosed is a check for the total due \$ _____ made payable to KKBE Religious School (preferred)

_____ I would like to make a partial payment of \$ _____ now and will:

_____ pay the balance by _____ (date)

_____ Make equal monthly payments so that the balance is paid in full by ___/___/___

_____ I will contact the Financial Secretary, Sally Davis, at 556-5868 or the Executive Director, Ken Davidson at 723-1090, extension 105 to make tuition arrangements.

It is our policy that no child be denied a Jewish education due to inability to pay. However, all children attending school must have arrangements made. Please do not hesitate to contact Sally Davis, or if you prefer, Ken Davidson or Amy Horner if your family needs assistance. All scholarships are kept confidential.

Emergency Contact

Please list 2 local people who may be consulted to make decisions in the event of an emergency if neither parent can be reached.

Last Name	First Name	Home Phone	Cell Phone	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Last Name	First Name	Home Phone	Cell Phone	Relationship
_____	_____	_____	_____	_____

Physician Name	Phone Number	Address
_____	_____	_____

Insurance Company	Policy Number	Preferred Hospital
_____	_____	_____

In case of an emergency, I request that the school contact me. If unable to reach me, I hereby authorize the school to call the emergency contact person(s) and/or physician listed above and follow his/her instructions. If you are unable to reach him/her, the school may make whatever arrangements seem necessary and in the best interest of my child.

Does your child have needs of which the teacher should be aware? ___ YES ___ NO

(Examples: allergies, dietary, behavior, learning, medical) If yes, please explain:

Photo Release

I hereby grant to Kahal Kadosh Beth Elohim, and to its officers, employees, agents and assigns, the right to photograph my dependent(s) and to use the photo and/or digital reproduction of him/her, or other reproduction of his/her physical likeness, for publication processes, whether electronic, print, digital or electronic publishing via the Internet.

If you **do not** grant the above permissions, please initial here: _____

I/we will read the Religious School Handbook at the beginning of the school year, and will address any concerns or problems with compliance, particularly with the discipline and dress code policies, with the Temple Educator.

Signature of parent or guardian _____ Date _____

Some Dates to Remember:

Please return registration form on or before 5:00 PM on July 31, 2006

First Day of Class — August 20, 2006

KKBE RELIGIOUS SCHOOL

◆ 90 HASELL STREET ◆ CHARLESTON, SC ◆ (843)723-1090◆ (843) 723-0537 FAX ◆

June 2006
Tammuz 5766

Dear Parents,

I hope you and your families are enjoying the summer. Although plenty of summer remains, at KKBE we are already thinking about the fall and the upcoming school year. I am looking forward to working with our dedicated Religious School committee and our committed, enthusiastic faculty to provide your children with an outstanding Jewish education.

It is time to register your child for the 2006-2007 school year. Classes will be held on Sundays from 10:30am to 12:30pm, with Hebrew classes meeting from 9:00am to 10:30am. The first day of school is Sunday, August 20, 2006. Thanks to our Sisterhood and Brotherhood, the first day of school will feature a sweet start! More details, along with the Religious School calendar and handbook, will be available closer to the beginning of the school year.

Although we attempt to reach all families who might be interested in the Religious School, it is always possible that we missed someone. If you know of a family with a child starting kindergarten, a family new to the area, or any family who might be interested in our program, please ask them to contact me or the synagogue office for information and registration forms. Families do not need to be members of KKBE for their children to attend our Religious School.

Please return your registration form and payment as soon as possible, as this will help us plan for the year ahead. If you have any questions about payment, or about the Religious School or Hebrew Program, please do not hesitate to contact me by phone, 723-1090 (ext. 103), or e-mail, ahorner@kkbe.org. It is our policy that no child be denied a Jewish education due to inability to pay. We do, however, ask that arrangements be made in advance. Confidential scholarship arrangements can be made by contacting our Financial Secretary, Sally Davis at 556-5868. If you prefer, you may also speak with our Executive Director, Ken Davidson, or with me regarding tuition assistance. Ken and I can be reached at the temple office, 723-1090 (ext. 105 for Ken, ext. 103 for me).

The faculty and I are looking forward to sharing an exciting year of learning with your child.

Shalom,



Amy I. W. Horner, MA
Educator

Kahal Kadosh
Beth Elohim

90 Hasell Street
Charleston, SC 29401

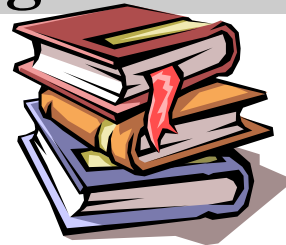
It's that time of year again...

KKBE

RELIGIOUS

SCHOOL

REGISTRATION



DON'T FORGET TO PUT THESE DATES ON YOUR CALENDAR!

Registration form due on or before July 31, 2006
First Day of Class — August 20, 2006

Questions? E-mail Amy Horner at ahorner@kkbe.org or call the KKBE office at 723-1090, ext. 103