

Mekom Torah Teens 5780 – New Student Registration Form

Student Info Name: _____ Date of Birth: _____
School: _____ Grade: _____
Email: _____ Phone: _____

Parent Info Names: _____
Address: _____

Email: _____ Phone: _____
Email: _____ Phone: _____
Synagogue affiliation, if any: _____

Please read, discuss together, and sign the following:

We're putting the following Sundays on our calendar, 1:00 - 2:30 pm, at BI or Ohev:

Sept 22, Oct 6, Nov 10, Dec 15, Jan 26, Feb 23, Mar 22, Apr 19, May 17

We realize that the success of this program depends on people showing up! We will do our best to be there, and will let you know as soon as possible when we can't make it.

Signed: _____ (student)

Signed: _____ (parent)

Please check one of the following:

We're enclosing a check for \$250 made out to Mekom Torah.

Please contact me at for a confidential conversation about finances, using this contact info: _____
(or feel free to contact Rabbi Helen Plotkin directly).

Would your family would be willing to sponsor a pizza lunch? (2 large cheese will do fine!) Yes No

Questions or ideas? Contact Rabbi Helen Plotkin at 610-368-4065 or rabbi@mekomtorah.org.

Please mail completed form to: Mekom Torah
PO Box 178
Swarthmore, PA 19081