

Beach Hebrew Institute

(Beach Synagogue)

109 Kenilworth Ave., Toronto M4L 3S4 Tel. 694-7942

HEBREW SCHOOL REGISTRATION FORM - 2018-19 5779

- PLEASE PRINT CLEARLY -

Student's name _____

Hebrew name _____

Date of birth _____ age _____

School _____ grade _____

Parent/Guardians names

1) primary _____ relationship _____
phone _____
e-mail _____

2) secondary _____ relationship _____
phone _____
e-mail _____

Address _____

Sunday morning emergency contact _____

Who can pick up the child from class? _____

Any medical conditions, allergies, concerns _____
