

Bnei Akiva Membership Form – Mas Chaver 5772



PLEASE USE BLOCK CAPITALS

[Bogrim – please complete form with HOME and TERM details]

SURNAME

PARENT/S' NAME/S

FULL ADDRESS

..... POSTCODE

TELEPHONE NO. PARENTS' MOBILE NO.

PARENTS' E-MAIL

SVIVA (local branch of BA)

SYNAGOGUE

CHILD 1

NAME DATE OF BIRTH

SCHOOL YEAR SCHOOL SHEVET NAME

CHILD'S E-MAIL

CHILD'S MOBILE NUMBER

CHILD 2

NAME DATE OF BIRTH

SCHOOL YEAR SCHOOL SHEVET NAME

CHILD'S E-MAIL

CHILD'S MOBILE NUMBER

CHILD 3

NAME DATE OF BIRTH

SCHOOL YEAR SCHOOL SHEVET NAME

CHILD'S E-MAIL

CHILD'S MOBILE NUMBER

I WOULD LIKE A BNEI AKIVA CALENDAR – PLEASE ADD £5 TO THE TOTAL BELOW

I WOULD LIKE TO SUPPORT THE KAYTANA PROJECT – PLEASE ADD YOUR DONATION BELOW

I enclose £..... payable to Bnei Akiva for Mas Chaver for the year 5772.

School Years 1-5 £32 (*£30) / School Years 6-13 £53 (*£48) / Bogrim £20 (*£15)

Family Rate (two or more people) £89 (*£85)

*Early-Bird Discount applies until 31st October 2011

**This form MUST be returned together with the medical form to:
Mas Chaver, Bnei Akiva, 2 Hallswelle Road, London NW11 0DJ**

Bnei Akiva reserves the right at its discretion to revoke membership for any reason it sees fit.

Data Protection Act 1998: The information you provide on this form will be used by Bnei Akiva for the administration of its weekly programmes, summer and winter camps, and Israel schemes. By signing this form you acknowledge that this information may include sensitive personal data, and you agree to the processing of this information by Bnei Akiva for administrative purposes.

FOR OFFICE USE

Date

Rcd £

MC No