



**GJC Teen Institute and Confirmation Class
5770 (2009–10) Enrollment Form**

Student Name: _____

Hebrew Name: _____

Date of Birth: _____

Secular School and Grade (September 2009): _____

GJC Religious School Grade (September 2009): _____

Parent/Guardian: _____

Address: _____ City: _____ Zip _____

Preferred Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Email Address(es): _____

Parent/Guardian: _____

Address: _____ City: _____ Zip _____

Preferred Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Email Address(es): _____

Parent/Guardian: _____

Address: _____ City: _____ Zip _____

Preferred Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Phone: _____ This phone is best reached (times) _____

Email Address(es): _____

Please enroll my child, _____, for 5770, the 2009–10
Religious School year.

Parent Signature

Date