

BH

Chabad of Hewlett – Jewish Center

516-295-3433 31 Franklin Ave Hewlett, NY 11557 Chabad@jewishhewlett.com www.JewishHewlett.com

BAR MITZVAH APPLICATION FORM –

Bar Mitzvah preparation 80\$ per a month

Hebrew reading tutoring 60\$ per a class

Last Name: _____

First name: _____

Date of birth: _____ · Day · Night

Hebrew name: _____

Address: _____

Zip Code: _____

Telephone Residence: _____ E-mail: _____

Father's name: _____

Mother's name: _____

Father's Hebrew name: _____

Mother's Hebrew name: _____

Preferred Bar Mitzvah Date: _____

Hebrew date of birth: _____

Have there been any conversions or adoptions in the family history? _____

If yes, please include all information and documentation.

Please note: All conversions must be made through a registered Beth Din that is certified by the Rabbinat of Israel.

Is the natural mother of the child Jewish? _____ Is the mother's mother Jewish? _____

Is the child a Kohen, Levi or Israelite? _____

Parent's signature: _____ Date: _____

Rabbi's Signature: _____
