

# Sephardi Youth

## Membership Form

**Hebrew Name:**

**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Email Address**

**Home Phone**

**Birthday**

**Born: day/night**

**Your Hobbies:**

**Sports**

  
  
  
  

**Dancing**

**Computer Games**

**Crafts**

**Reading**

**Singing**

  
  
  
  

**What programs would you like to see at shul?**

**1** \_\_\_\_\_

**2** \_\_\_\_\_

**3** \_\_\_\_\_

**4** \_\_\_\_\_

**5** \_\_\_\_\_

**By becoming a member of Sephardi Youth you automatically enter into our annual raffle to win a LAPTOP! And other prizes**



Sephardi  
Youth

**Sephardi Yo\_th whats missing?**