NEJC Hebrew School Expression of Interest Form

Print, Fill in, Scan or Photograph then email form to t.frankel71@gmail.com

Parent Information	
Surname	
First name	
Mobile phone	
Home /work phone (optional)	
Email address	
Student 1	
Surname	
First name	
Age	
Previous Hebrew lessons Please circle	No / Yes
Hebrew knowledge level Please circle ones that apply	knows letters/ knows vowels/ reads simple words or sentences/ understands spoken Hebrew/ Any other information you wish to provide
Student 2	
Surname	
First name	
Age	
Previous Hebrew lessons Please circle	No / Yes
Hebrew knowledge level Please circle ones that apply	knows letters/ knows vowels/ reads simple words or sentences/ understands spoken Hebrew/ Any other information you wish to provide
For additional students email two pages	