B'NEI MITZVAH BIOGRAPHY FORM

Please complete and return to the Judy Moseley, Executive Director no later than 3 months before your scheduled date.

2x3 digital photo	NAME:
black and white or color	BAR/BAT-MITZVAH DATE:
email to	SCHOOL NAME:
jmoseley@temple- beth-el.org	GRADE:
PARENTS'/GUARDIANS' NAME(S):	
PARENT/GUARDIAN 1:	
PARENT/GUARDIAN 2:	
FAVORITE ACTIVITIES (SPORTS, HOBBIES, CLUBS, ETC.):	
1	
2	
3	
4	
WHAT DOES BECOMING BAR/BAT-MITZVAH MEAN TO YOU? (use back for more room, if needed):	