



Zone 13!

THE ULTIMATE BAR MITZVAH CLUB!

REGISTRATION FORM



STUDENT'S INFORMATION

First & Last Name: Hebrew Name:
Date of Birth: Before or After Sunset? Cell Phone #:
Email:
Any previous Jewish Education? ☐ Yes ☐ No Where?

PARENT'S INFORMATION

Child lives with: ☐ Both Parents ☐ Mother ☐ Father ☐

FATHER

First & Last Name:
Hebrew Name:
☐ Single ☐ Married to mother ☐ Married to other
Jewish? ☐ By Birth ☐ Converted (pls provide docs) ☐ Not Jewish
Address:
City & Zip:
Home Phone #:
Cell Phone #:
Work Phone #:
Email:

MOTHER

First & Last Name:
Hebrew Name:
☐ Single ☐ Married to father ☐ Married to other
Jewish? ☐ By Birth ☐ Converted (pls provide docs) ☐ Not Jewish
Address:
City & Zip:
Home Phone #:
Cell Phone #:
Work Phone #:
Email:

EMERGENCY CONTACT (OTHER THAN PARENTS)

Name: Relationship:
Phone #: Notes:

AGREEMENT

- 1) I understand that the lessons are just a guide for me to study, but the main study I will do on my own.
- 2) I agree to come to shul on Shabbat at least twice a month until my Bar Mitzvah and twice a month for at least a year after.

Student Signature: Parent's Signature: Date: / /

PROGRAM FEES

- ☐ Individual Lesson (approx. 40 minutes) \$60
☐ Zone 13! Club Only \$450
(includes all material, projects and Shabbaton dinner)
☐ Full Package \$1,800
Includes Club & weekly Private Lessons



**18% OFF
FOR MEMBERS**

Join now at
[ChabadChayil.org/
Membership](https://ChabadChayil.org/Membership)

We will work with any Jewish child regardless of their ability to pay. If you need help, simply reach out.

PAYMENT INFORMATION

Total Paid: \$ Amount Due: \$ Payment Plan: ☐ Yes ☐ No
Date Paid: / / Payment Plan Details / Dates to Charge Card:
☐ Cash ☐ Check # ☐ Credit Card: Exp: / CVV:
Other Payment Options: ☐ Zelle ☐ PayPal ☐ CashApp ☐ Venmo ☐ Google Pay
office@ChabadChayil.org office@ChabadChayil.org \$ChabadChayil @ChabadChayil office@ChabadChayil.org



2601 NE 211 Terrace | Miami, FL 33180
(305) 770-1919 | Office@ChabadChayil.org | ChabadChayil.org/Zone13

