

# **CBEY YOUTH REGISTRATION FORM**

**ALL CHILDREN NURSERY THROUGH HIGH SCHOOL  
MUST BE REGISTERED IN OUR YOUTH DEPARTMENT  
IN ORDER TO PARTICIPATE IN ANY YOUTH ACTIVITIES:  
GROUPS, TRIPS, PARTIES ETC.**

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**PLEASE FILL OUT THE  
FORM BELOW AND MAIL**

**TO:**

Moshe Brandsorfer  
560 Harbor Drive  
Cedarhurst, N.Y. 11516

**Or email it to:**

[cbeyyouth@gmail.com](mailto:cbeyyouth@gmail.com)

**REGISTRATION FORM 2012-2013 (5772-5773)**

**FAMILY NAME** \_\_\_\_\_ **MOTHER** \_\_\_\_\_ **FATHER** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**MOTHER CELL #** \_\_\_\_\_ **MOTHER EMAIL** \_\_\_\_\_

**FATHER CELL #** \_\_\_\_\_ **FATHER EMAIL** \_\_\_\_\_

**CHILD(1)** \_\_\_\_\_ **AGE** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_

**CHILD(2)** \_\_\_\_\_ **AGE** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_

**CHILD(3)** \_\_\_\_\_ **AGE** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_

**CHILD(4)** \_\_\_\_\_ **AGE** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_

**CHILD(5)** \_\_\_\_\_ **AGE** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_

**ALLERGIES/OTHER INFORMATION NEEDED**

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**\*Please note: The youth department fee is included in the general shul membership.**